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ABSTRACT

This bibliography and resource guide for social work educators aims to provide easy entrance to the literature on alcohol and other drug use. The introduction notes that some characteristics of the literature make access difficult. Literature on alcohol and other drugs is multi-disciplinary and thus appears in many different areas of publication; in addition, because of the structure of many data bases and their indexing practices, much of the literature does not appear in online searches. The social work literature on alcohol and other drugs tends to focus on discrete, narrowly circumstances clinical practice issues. Few works are directed to the social work practitioner who is a non-alcohol/drug specialist. The bibliography and resource materials include current materials, primarily from 1985 on under five topics: (1) early intervention and treatment; (2) the family; (3) prevention; (4) the work place; (5) special populations. Items were selected from the scholarly, formal literature which would provide an authoritative, current update and an entree to the literature. The guide organizes the materials in four sections: the social work literature on alcohol and drugs (includes a section on workplace-employee assistance programs); the alcohol and substance abuse literature (includes a section of classic articles); other resources (organizations, newsletters); resources for faculty (professional education, curriculum materials, the impaired professional, sources of information). Each reference includes a brief summary of its content. (JB)

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Bibliography and Resource Guide on Alcohol and Other Drugs for Social Work Educators

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Bibliography and Resource Guide on Alcohol and Other Drugs for Social Work Educators

A Collaborative Project
of
The National Association of Social Workers
The Office for Substance Abuse Prevention

prepared by

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and Resource Center
Dartmouth Medical School
Hanover, New Hampshire

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FOREWORD

In recent years, the abuse of drugs and alcohol has become the number one social problem in America. It affects the lives of abusers, their families, and entire communities. Because of their knowledge of and skills in working effectively with the person-in-environment, social workers are essential partners in any successful campaign to eradicate this scourge from our society.

The National Association of Social Workers and the Office for Substance Abuse Prevention have been collaborating in the exploration of programs and materials to benefit the social work profession in the area of substance abuse prevention. We are proud to present this annotated bibliography as an initial step in this process. We are offering this document as an important resource for the initial preparation of social workers and for the professional development of seasoned social workers. By virtue of our mutual roles in preventing substance abuse, we hope this publication will assist the advancement of social work practice.

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September 15, 1989

Bibliography and Resource Guide
on Alcohol and Other Drugs
for
Social Work Educators

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Introduction

This *Bibliography and Resource Guide* has been prepared for social work educators. The intent has *not* been to be exhaustive but to be selective, by incorporating materials that are authoritative, address the relevant issues in the designated areas, and provide easy entrée to the literature on alcohol and other drug use through their references and bibliographies. Characteristics of the alcohol and drug literature, described below, make becoming current a challenging effort. This bibliography and resource guide is intended to ease the task.

Though becoming informed and being current may not be easy, it is critically important. Much of social work education is case-centered. Thus, all faculty find themselves confronted by the case material that their students present. Faculty as well as their students do not have the luxury of being uninformed about alcohol and other drug use, or viewing it as a clinical issue to be delegated to the specialist. Whatever the clinical training site—the family service agency, a mental health clinic, programs for the homeless, services for children, the schools, the workplace, or the community agency in an ethnic neighborhood—students will find that alcohol and other drug use is frequently a part of the presenting problem and a significant factor in the environment. Similarly, those engaged in administration and planning need to be cognizant of the influences upon and manifestations of alcohol and other drug use problems in the social problems they confront.

Notes on the Literature

Characteristics of the Literature on Alcohol and Other Drugs

The literature on alcohol and other drugs is distinctive in several important respects. It is multi-disciplinary. The core knowledge base for the field is drawn from disparate disciplines, ranging from the social sciences, to the medical sciences, to the law, economics and political science, to the spectrum of helping professions. Thus, the relevant literature is scattered through the journals of broader disciplines.

Beyond its interdisciplinary nature, as a "newer" field of academic inquiry, the field is marked by a multiplicity of specialty journals. There is currently a proliferation of publications. As new ones come into existence, others cease publication, or change publishers, or make significant changes in editorial practices. As fields "mature" the number of journals tends to decrease; a circumscribed number of well-recognized publications become the major vehicle for the field's scholarly and scientific communications.

The substance abuse literature is also characterized by its relative separation and isolation from the established professional literature. The flow of information can be discerned from citation patterns. Although alcohol and drug journals cite materials published in the established professional literature, the reverse is far less common. Thus information com-municated through the specialty literature does not tend to flow into the broader profess-ional literature.

There is another feature of the alcohol and drug literature that makes access to it difficult. Much of it would be described by librarians and information specialists, is "fugitive" or "ephemeral" literature. Alcohol and drug journals are indexed, not from cover to cover, but indexed only selectively by many of the established databases, such as Medlines. As a consequence, an online literature search of those sources cannot be presumed to identify the body of published work. Beyond the problems created by this selective indexing, the most useful materials are often those in a format that automatically excludes them from most databases, for example, special reports commissioned by the government, national agencies, foundations, or professional associations.

The consequences of the above for the social work educator and practitioner is that attention and effort is required both to become informed and to remain current on topics related to alcohol and other drugs. He or she can not anticipate that the usual professional readings will adequately accomplish that end.

The Social Work Literature on Alcohol and Other Drugs

The following statement could be applied to the literature of any of the helping professions. Were the magnitude of alcohol and drug use problems to be inferred from the proportion of professional social work literature directed to the topics, the extent of these problems would be significantly underestimated. From the volume of social work literature on this major social problem, one would not reasonably surmise either that social work professionals are the nation's primary provider of mental health services or that alcohol and drug use problems are the nation's most common psychiatric problem for those between the ages of 16 and 65.

The social work literature on alcohol and other drugs tends to focus upon discrete, narrowly circumscribed clinical practice issues in providing alcohol and drug services, for example, reports on group work with substance abusing adolescent females. Thus, the published materials are directed primarily to others similarly engaged in providing specialized alcohol and/or drug abuse services. There are fewer materials directed to the social work practitioner who is a non-alcohol/drug specialist. There are fewer works on topics such as the identification, assessment, and management of a potential alcohol or drug use problem for the client seen in non-substance abuse agencies.

Interestingly, social work professionals *are* publishing on alcohol and drug use topics. However, they are doing so outside the social work literature. Social workers are among the major contributors to the substance abuse literature. Whether this reflects an author's primary identification as being with the alcohol-substance abuse professional community, or whether this reflects an author's decisions about the community to whom communications are most pertinent, or whether it reflects journals' editorial policies is unknown. However, the factors that influence social workers' publication patterns on alcohol and other drug use warrant consideration. Efforts to inform and educate any professional group are best accomplished by colleagues. To the extent that social workers publish in the journals outside their social work colleagues' sphere of professional communications, and publish in a literature that is difficult for other social workers to access, this represents the loss of an important avenue for professional education.

Preparation of the *Bibliography and Resource Guide*

The charge. In assembling the bibliography and resource materials, the charge was to select current materials, primarily from 1985 to the present, and to focus upon five areas: early intervention and treatment, the family, prevention, the workplace, and special populations.

Identification of materials. A variety of sources were used to identify materials for potential inclusion in the Bibliography. These include online databases (Social Work Abstracts, CORK, Psycinfo, Family Resources, Medline, and Drug Info), consultation with social work educators and consultation with information specialists from the field.

Acquisition of materials. Original copies of all materials identified were assembled to evaluate them for inclusion, to verify citations, to secure information not provided in the secondary sources, and to prepare annotations when author abstracts were not provided.

Selection criteria. In selecting materials for inclusion, the effort was to incorporate items that would provide an authoritative current update, and provide an entrée to the literature. Items selected are almost exclusively from the scholarly, formal literature; material from the ever-growing field of "popular", "lay" or "counselor" literature has been

excluded, unless the latter addresses topics not discussed in the scholarly literature.

In keeping with the charge of providing current materials, emphasis was placed upon work published after 1984. To provide an historical context for the current literature, a selective bibliography of "classics" from the alcohol and drug use literature was incorporated. These seminal works have significantly defined the field and continue to be cited frequently.

Organization of the *Bibliography and Resource Guide*

The material is organized into four sections. The first two Sections include bibliographic material. The print materials are assigned to either of these first two sections on the basis of the source of publication, and the audience to whom they are directed. The Social Work literature on alcohol and other drugs is found in Section I. Whereas, Section II is comprised of the literature drawn from the alcohol-drug fields and other professional disciplines. Within each of these sections the literature is organized by topical areas. The criteria used for assigning items to topics are noted in the introductory comments for Section I.

The decision to include the literature from the fields of alcohol and other drugs was made because it may be the literature that, though least familiar, may be that most critical for social work faculty. The latter is suggested by the nature of the references in the recent, June 1989, special issue of *Social Casework* on the theme of Alcoholism. Of the 156 references for the eight articles comprising that special issue, only 13 (8%) were references to work published in the social work literature. Thus, the majority came from sources outside the social work field, from other disciplines and the specialty alcohol and drug literature. Distinguishing between the literature on the basis of its being generated by the social work or the alcohol-drug fields has utility for faculty. The literature source suggests its availability and offers guidance in accessing it. It also eases the task of identifying and selecting articles for specific audiences, when the locus of publication is deemed significant.

Sections III and IV provide information on other resources. Section III describes organizations and newsletters from the alcohol and drug fields that are of potential interest to social work faculty and practitioners. Section IV includes materials on a range of other resources for faculty, discussion of professional education, curriculum materials, the impaired professional and further sources of information.

Section I

The Social Work Literature on Alcohol and Other Drugs

Comments

- Section I includes journal articles on alcohol and other drugs published in the Social Work literature. The materials are thus from the body of scholarly work familiar to both the social work academic and social work practitioner. The Section also includes books authored or edited by social workers and directed primarily to the profession.
- The materials are organized by topic. The criteria used for assigning items to a category are as follows:

  General. This has been used for those materials that provide overviews and/or cover multiple topics.

  Special Populations. *All* materials addressing ethnic, minority, or high risk groups have been incorporated under Special Populations, even when the content of the materials e.g. early intervention, might might have allowed an alternative designation.

  Early Intervention and Treatment. Only materials limited to discussion of early intervention or treatment are incorporated her. Many of the works within the General Section also cover the topic.

  The Family. This designation is used for the family unit as a whole, portions of the family unit, such as children of alcoholics, for materials directed toward specific age groups, whether adolescents or the elderly, and for materials on women.

  Prevention. With the *exception* of prevention efforts with ethnic, minority, and high risk groups, which are included in Special Populations, this category includes all materials dealing with prevention efforts, including those with youth and adolescents.

  The Workplace—Employee Assistance Programs. All literature pertinent to alcohol and other drug use and the workplace is incorporated under this heading. As occupational social work is well established within social work education, in selecting literature the emphasis was placed upon identifying the "fugitive" or "ephemeral" literature, rather than basic or introductory work, with which the profession is well acquainted and has easy access.
- The source of the abstract or annotation is noted at the conclusion of each entry.

General

1. Anderson SC. Alcohol Use and Addiction. IN: Minahan A, ed. *Encyclopedia of Social Work*, Eighteenth Edition. Silver Spring MD: National Association of Social Workers, 1989. pp. 132-141. (27 refs)

This chapter addresses the epidemiology of use and related problems, special populations, physical and psychosocial consequences of chronic use, theories of etiology, development of alcoholism, treatment models, social policy issues, and the contemporary debates and issues. (Project Cork Institute)

2. Ashford J. Legal criteria and clinical predictions in drug legislation. *Soc Casework* 68(6):364-369, 1987. (34 refs)

Social workers are often asked to predict offender likelihood of benefiting from statutory drug treatment. However, many workers are unaware of the controversy surrounding such predictions and the philosophical issues involved. The article aims to identify issues in the administration of justice and public policy that are germane to the use of clinical predictions in distributing statutory benefits of drug treatment. First, trends in criminal-sentencing policy regarding fixed and individualized approaches to disposing of drug-

dependent offenders are outlined. Second, the philosophical problems are examined in light of the debate between fixed and individualized approaches to predicting offender behavior. Problems with existing legislative criteria are also identified. Finally, the implications of these are delineated for social work practitioners and policy makers. (Author Abstract)

3. Atkins JM, ed. Dimensions of Alcoholism Treatment. *Soc Casework* 59(1): entire issue. 1978.
This issue of *Social Casework* focusing upon alcoholism treatment was compiled from presentations made at NASW's New York City Chapter's 1978 Alcoholism Institute, sponsored by the Chapter's Alcoholism Committee. Several of the articles represent seminal pieces on topics which were only then becoming recognized as warranting special attention, e.g. social workers as "enablers," the need for tailoring treatment approaches to special populations, adolescents and women. The clinical approaches discussed throughout the volume continue to be timely and useful frameworks for integrating alcohol treatment services into social work practice. (Project Cork Institute)

4. Brisbane FL, ed. Treating the Alcoholic: A Social Work Challenge. *Soc Casework* 70(6):323-392 (entire issue), 1989.
The theme of this special issue, Alcoholism, was selected by the editor in response to the large numbers of dysfunctional families alcoholism produces, the inadequate attention that has been paid to treatment, and the historic failure of the profession to assess and treat alcoholism. The solicited contributors include practitioners, academics and researchers, and program administrators from the alcohol field. The topics addressed include a biopsychosocial model of alcoholism, dual diagnosis and clinical implications, family systems treatment models, interventions with special client populations, i.e. adolescents, women, and black males, and training for social workers. (Project Cork Institute)

5. Cook D; Fewell C; Riolo J, eds. *Social Work Treatment of Alcohol Problems*. New Brunswick NJ: Rutgers Center of Alcohol Studies, 1983. 153 pp.
The articles in this volume were selected from presentations made at the 1979 and 1980 Annual Institutes sponsored by the New York City NASW Chapter's Alcoholism Committee. The fourteen chapters are predominantly directed to clinical practice and address routine screening, interviewing at intake, the professional assessment of children of alcoholics, application of social work practice theory to alcoholism treatment, special populations, and models for treatment. (Project Cork Institute)

6. Corrigan E. Alcohol knowledge and practice issues. *Health Soc Work* 4(4):9-40, 1979. (38 refs)
Although problems related to the use and abuse of alcohol have social, psychological, and physiological implications, the treatment of alcoholism has received minimal attention as an area of serious practice by helping professionals. To encourage practicing social workers to sensitize themselves to these problems, this article summarizes important knowledge available in the field of alcoholism and explores issues concerning theory and treatment that are relevant to social work practice. (Author Abstract)

7. Fraser M; Kohlert N. Substance abuse and public policy. *Soc Ser Rev* 62(1):103-126, 1988. (108 refs)
This article assesses the American effort to control and eradicate substance abuse and drug trafficking. Five drug control strategies—foreign crop eradication, border interdiction, deterrence, treatment, and prevention—are evaluated. In each area the basic programs and their effectiveness are described. The authors conclude that U.S. policy is

misdirected, dominated by long-standing and insupportable beliefs about the effectiveness of supply-side intervention such as eradication and interdiction. (Authors' Abstract)

8. Freeman EM, ed. *Social Work Practice with Clients Who Have Alcohol Problems*. Springfield IL: Charles C. Thomas, 1985. 383 pp.
This edited volume with twenty-two contributors is divided into four parts: Prevention, General Issues in Treatment and Treatment of Special Populations; Research; and Training, including the training of graduate social work educators. While addressed to mental health students and practitioners of various disciplines, it is of special importance to social workers. The contributors, primarily social work practitioners and social work faculty, draw upon social work frameworks of the individual in the context of the environment and a systemic approach to assessment, treatment, and evaluation. (Project Cork Institute)

9. Garbin JP. Professional values vs. personal beliefs in drug abuse. *Soc Work* 19(3):333-337, 1974. (9 refs)
The professional social worker in the field of drug abuse may find his personal beliefs in conflict with his professional responsibilities. The author describes three distinct roles of the professional social worker and discusses the tensions that might arise in each role. (Author Abstract)

10. Googins B. Avoidance of the alcoholic client. *Soc Work* 29(2):161-166, 1984. (27 refs)
The author explores the widespread avoidance of the identification and treatment of alcoholism by the social work profession. The article examines the underlying causes of this avoidance and suggests guidelines to overcome the organizational and the professional barriers that have kept alcoholics from seeking social work treatment. (Author Abstract)

11. National Association of Social Workers. Alcoholism and Other Substance Abuse-Related Problems. IN: *NASW Policy Statements*. Silver Spring MD: NASW, June 1988. pp 12-15.
In 1987 the New York City Chapter, NASW submitted a resolution, which was subsequently adopted by the NASW Delegate Assembly as a policy statement on alcohol- and other substance-related problems. The policy statement, following a description of pertinent information and the critical issues that provide the rationale, speaks to four major issues: treatment and service delivery, social policy, professional issues, and research.

12. Roffman RA. Drug Use and Abuse. IN: Minahan A, ed. *Encyclopedia of Social Work*, Eighteenth Edition. Silver Spring MD: National Association of Social Workers, 1989. pp. 477-484. (45 refs)
This chapter covers the following topics: drug classifications, trends in drug use, antecedents, consequences, etiology, special populations, policies and programs, and social workers' involvement in the treatment of drug use problems. (Project Cork Institute)

13. Rothman J; Reed B. Organizing Social Action to Address Alcohol and Drug Problems. IN: Cox R, et al, eds. *Tactics and Techniques of Community Practice*, Second Edition. Itasca IL: F.E. Peacock Publishers, 1984.
This article points to the committee structure required to launch a successful organizing drive to eliminate a pattern of substance abuse in the community. Stress is placed on the need to make a complex differential assessment of the needs and resources, and to

establish stages in the organizational activity, using principles of locality development. Good references are provided for finding sources for a community campaign, and for additional reading. (P. A. Kurzman)

14. Saltzman A. Reporting child abusers and protecting substance abusers. *Soc Work* 31(6):474-476, 1986. (22 refs)
Discusses the fact that every state has laws requiring social workers to report cases of child abuse or neglect and that federal laws prohibit disclosures about substance abuse clients. A quandary results when incidents of child abuse involve clients who are substance abusers. Federal confidentiality requirements, suggested resolutions, court opinions, and proposed regulations are described. (© PsycInfo Abstract)

15. Vaillant C; Milofsky E; Richards R; Vaillant GE. A social casework contribution to understanding alcoholism. *Health Soc Work* 12(3):169-176, 1987. (37 refs)
This article describes a 40-year longitudinal study of alcoholism including the etiology of, progression of and recovery from the disease. The findings are paralleled with similar studies conducted by social work professionals. The capacity of a longitudinal study to elucidate alcoholism and the recovery process is underscored. The etiological hypothesis that views alcoholism primarily as a symptom of psychological instability is questioned. (Authors' Abstract)

16. Weisner C; Room R. Financing and ideology in alcohol treatment. *Soc Probl* 32(2):167-184, 1984. (74 refs)
This case history of treatment services for alcohol problems in California since 1970 shows how changes in the way such services are financed influences the treatment provided. The article looks at the history of the treatment system and the reasons why it changed from a government-supplied service to a contracted-out service dominated by private agencies. How these changes have affected the ideology of alcohol treatment and the client composition of programs is discussed. (Authors' Abstract)

Early Intervention and Treatment

1. Black R; Drachman D. Hospital social workers and self-help groups. *Health Soc Work* 10(2):95-103, 1985. (18 refs)
Self-help has developed into a significant trend in health care, and the relationship between professional services and self-help has begun to be explored. This article describes a survey that investigated hospital social workers' involvement with self-help groups and reports the need for a dual focus on research and clinical training to prepare social workers for the practice challenges presented by the self-help movement. (Authors' Abstract)
N.B. Self-help is a significant element in substance abuse treatment. This articles addresses generic issues applicable to substance abuse.

2. Chernus L. Clinical issues in alcoholism treatment. *Soc Casework* 66(2):67-75, 1985. (17 refs)
From a clinical perspective this article explores some of the factors that may influence a therapist to continue outpatient therapy or to consider a referral for inpatient treatment. To facilitate this discussion, a few key concepts in understanding alcoholism as a disease are reviewed and research on inpatient versus outpatient treatment summarized. (Author Abstract)

3. Kagle J. Secondary prevention of substance abuse. *Soc Work* 32(5):446-448, 1987. (9 refs.)
This article summarizes a study involving 100 cases from four agencies, conducted by chart review and clinician interview, to ascertain the prevalence rates of suspected and diagnosed alcohol and drug problems and the nature of interventions with clients and their family members. The study found that 5% of all cases were diagnosed as involving alcohol and/or drug problems and a referral was made. Clinician interviews indicated that for an additional 30% of the cases a substance abuse problem was suspected, but no interventions made. Professional judgement was cited as the major reason for the absence of higher rates of formal diagnosis and referral. The rationale for these judgements was that substance abuse was not the core problem, or that the client and family were not ready to deal with the substance abuse problem, or pessimism about the outcome of treatment, as well as organizational issues, such as agency resistance to referrals for substance abuse, or that referral was outside their professional role within the agency. (Project Cork Institute)

4. Koppel F; Stimmler L; Perone F. The enabler: A motivational tool in treating the alcoholic. *Soc Casework* 61(9):577-583, 1980. (10 refs)
Counselors working with alcoholic clients can use potential enablers effectively as a tool to engage what might be an unmotivated client in treatment. Workers must appeal to the potential enablers' vested interests, educate them regarding alcoholism, and then establish a therapeutic contract with them. (Authors' Abstract)

5. Kurtz L. Cooperation and rivalry between helping professionals and members of AA. *Health Soc Work* 10(2):104-112, 1985. (21 refs)
Because Alcoholics Anonymous (AA) is an important resource for recovering alcoholics, most treatment centers want to work cooperatively with it. To identify factors that enhance this cooperation, the author surveyed AA members and professionals in the same communities and obtained a profile of their interactions, ideological similarities, and linking activities. (Author Abstract)

6. Leikin C. Identifying and treating the alcoholic client. *Soc Casework* 67(2):67-73, 1986. (21 refs)
Alcohol abuse is identified as a disease rather than a symptom of emotional and psychological problems. Assessment techniques, symptoms, progression of the disease, and treatment of the alcoholic and his or her family are reviewed for the social worker in a general practice setting. (Author Abstract)

7. Logan S; McRoy RG; Freeman EM. Current practice approaches for treating the alcoholic client. *Health Soc Work* 12(3):178-186, 1987. (27 refs)
This article identifies and assesses a range of practice approaches used by mental health practitioners to work with alcoholic clients and proposes a differential intervention approach to help social workers make appropriate individual treatment plans. The model includes relevant principles for working with alcoholic clients and lists factors that social workers should consider when selecting treatment approaches for alcoholics. (Authors' Abstract)

8. Parihar B. Issues and answers in treating alcoholism. *Soc Casework* 63(6):333-339, 1982. (23 refs)
While noting the magnitude of the problem, and growing acceptance of alcoholism as a disease, the author succinctly describes the ambiguities and controversy that were present in the field in the early '80s including: lack of consensus on definitions and diagnostic criteria, fragmentation of care, absence of individualized treatment, diversity of

therapeutic orientations, the frequency of misdiagnosis, and an overemphasis on motivation in recovery. The potential contributions of training, research and program evaluation are discussed as routes to fostering improved clinical care. (Project Cork Institute)

9. Toseland R; Hacker L. Social workers' use of self-help groups as a resource for clients. *Soc Work* 30(3):232-237, 1985. (27 refs)
Self-help groups are an important part of the network of community resources that are available for social workers to use in working with clients. This article describes the results of a survey conducted by the authors to identify the factors that influence such use. Implications of the findings are discussed in terms of the impact on social work practitioners and their clients, and recommendations are offered for improving the relationship between social workers and self-help groups. (Authors' Abstract)
While not specifically addressing self-help in substance abuse treatment, the general themes discussed are relevant to clients with alcohol and substance abuse problems.

The Family

1. Anderson S; Grant J. Pregnant women and alcohol: Implications for social work. *Soc Casework* 65(1):3-10, 1984. (56 refs)
This article reviews for social work practitioners the historical and current knowledge about the effects of maternal drinking on offspring, i.e. the Fetal Alcohol Syndrome (FAS) and Fetal Alcohol Effects (FAE). It offers a rationale for primary prevention and active intervention by social workers, and discusses treatment and program issues. (Project Cork Institute)

2. Anderson S; Henderson D. Family therapy in the treatment of alcoholism. *Soc Work Health Care* 8(4):79-94, 1983. (50 refs)
The disease of alcoholism has long been known to significantly affect family relationships. Nevertheless, the characteristics and needs of these families are frequently not well understood, and treatment of the alcoholic in isolation continues to remain the norm. Family systems theory can provide a framework for comprehensive diagnosis and treatment which recognizes and addresses alcoholism as a family disease. (Authors' Abstract)

3. Corrigan E. Women's combined use of alcohol and other mind altering drugs. IN: Burden D; Gottlieb N, eds. *The Woman Client*. London: Tavistock, 1987. pp. 162-176. (42 refs)
The epidemiology of women's alcohol and multiple drug use and the consequences of such use, including drug overdoses are described. The chapter emphasizes the central nervous system depressant effects induced by alcohol as it is the primary mood-altering drug used by women. Women's extensive combined use of alcohol and other mood-altering drugs and, in contrast to men, their different physiological response and the more frequent occurrence of problems, raises both practice and policy issues. (Project Cork Institute)

4. Giannetti V. Medication utilization problems among the elderly. *Health Soc Work* 8(4):262-270, 1983. (28 refs)
The improper use of medication can frequently threaten the health and well-being of elderly persons. This article alerts social work practitioners to the possible dangers of drug utilization among the elderly, i.e. overprescribing, dose-related complication in light of physiological changes accompanying aging, drug interactions, and non-compliance.

The author concludes with a discussion of steps social workers can take to address these problems. (Author Abstract)

5. Giunta C; Streissguth A. Patients with fetal alcohol syndrome and their caretakers. *Soc Casework* 69(7):453-459, 1988. (15 refs)
Patients with fetal alcohol syndrome typically have multiple handicaps and require special medical, educational, familial, and community assistance. Their caretakers need medical information, peer support, financial assistance, and respite care. (Authors' Abstract)

6. Jacobs P; Lurie A; Cuzzi L. Coordination of services to methadone mothers and their addicted newborns. *Health Soc Work* 8(4):290-298, 1983. (19 refs)
Maternity social workers and workers in hospital methadone clinics often experience conflict about reporting child abuse and neglect. This article discusses how earlier and more aggressive reporting of child abuse and neglect can be accomplished if methadone clinics are integrated into social work departments of hospitals and include social workers on their staffs. (Authors' Abstract)

7. LePantois J. Group therapy for children of substance abusers. *Soc Work Group* 9(1):39-51, 1986. (21 refs)
Twenty-five latency aged children of alcohol and cocaine dependent parents participated in a weekly open-ended outpatient therapeutic group for a year. The children discussed issues in family life relating to their parents' addictions. The goals were to assist the children in overcoming feelings of isolation, shame or guilt related to their parents' addictions, to provide the children with an opportunity to experiment with a wide range of social roles and to educate the children about the disease concept of addiction. (Author Abstract)

8. McElligatt K. Identifying and treating children of alcoholic parents. *Soc Work Educa* 9(1):55-70, 1986. (58 refs)
Many children who are referred to school social workers for behavior and learning problems come from alcoholic families. School staffs and service providers have often neglected to recognize and treat the special problems that result. Concepts that will help social workers identify children of alcoholics, intervene in their behalf, and provide leadership in designing services for them are presented. (Author Abstract)

9. Pruzinsky E. Alcohol and the elderly: An overview of problems in the elderly and implications for social work practice. *J Gerontolog Soc Work* 11(1-2):81-93, 1987. (31 refs)
This article provides an overview of what is currently known about elderly alcohol use and abuse. It identifies areas of social work practice that need to be improved to meet the needs of elderly problem drinkers, and makes recommendations regarding identification, treatment, and coordination of services for this population. (Author Abstract)

10. Raffoul PR. Drug misuse among older people: Focus for interdisciplinary efforts. *Health Soc Work* 11(3):197-203, 1986. (21 refs)
The extensive use of drugs among older people and the potential for drug misuse among members of this age group suggest that social workers need a base of knowledge and skills for dealing effectively with the problem of misuse. After reviewing data on the use of drugs among the elderly, the author describes key roles that social workers can perform in undertaking interdisciplinary intervention with older consumers of drugs. (Author Abstract)

11. Robertson J. A tool for assessing alcohol misuse in adolescence. *Soc Work* 34(1):39-44, 1989. (44 refs)
An increase in the social and personal problems of adolescents who abuse alcohol necessitates social worker intervention to help prevent the development of more serious life problems. Social workers must be able to assess the extent of adolescent alcohol involvement. The Adolescent Alcohol Involvement Scale (AAIS) is a screening tool that, when used in conjunction with a detailed social history, can assess alcohol involvement, especially alcohol misuse. A description of AAIS and procedures for its use are presented. The results of a study that was conducted to establish the reliability and validity of AAIS with clinical and random samples indicated that AAIS should be used by practitioners because AAIS is simple to use, requires little time to administer, and can be be used for research. (Author Abstract)

12. Schilit R; Gomberg E. Social support structures of women in treatment for alcoholism. *Health Soc Work* 12(3):187-195, 1987. (18 refs)
The authors in this article explore the weak social support structures of alcoholic women (in treatment) to identify those critical elements that might be usefully attended to in treatment. Data were derived from a comparison between survey questionnaires from 301 alcohol-dependent women and 136 nonalcohol-dependent women. Results showed that alcoholic women reported less social support than their controls; were more likely to be separated and divorced; and described their existing relationships as less happy and less supportive. Additionally, the current study reports that the linking of social support to various aspects of psychological adaptation offers a theoretical base for developing broad-based preventive and treatment interventions. (Authors' Abstract)

13. Shields S. Busted and branded: Group work with substance abusing adolescents in schools. *Soc Work Group* 8(4):61-81, 1985-86. (12 refs)
This article is based upon the experience derived from a group work program conducted for over a decade by the Archdiocese of New York, for substance abusing adolescents referred primarily by the schools. Noting that this population is frequently described as "hard-to reach" and significantly different from their non-drug using peers, the author describes the successful application of the Mutual Aid Model of group work process, based upon the work of William Schwartz. The author discusses in detail the various stages of the group process, specifically the self-preparation of the group worker, the contract, the middle phase, and incorporation into the group process of the themes of drugs and stigmatized status. (Project Cork Institute)

14. Smith T. Group work with adolescent drug abusers. *Soc Work Group* 8(1):55-64, 1985. (16 refs)
The author argues that group workers should consider the severity of adolescents' drug use before designing and implementing groups. Because drug-abusing adolescents are in a state of anomie, groups should focus on re-engaging them into their social systems. One key may be found in how drug abuse is defined. The author asserts that not all drug use is abusive and that variants of drug-education groups are appropriate for many adolescents. Two case illustrations are given along with implications for practice. (Author Abstract)

15. Smith T. Reviewing adolescent marijuana abuse. *Soc Work* 29(1):17-21, 1984. (51 refs)
The literature on marijuana use is reviewed in this article, and a distinction is drawn between use and abuse. Prescriptions for responsible use are suggested, along with directions for social work practice with adolescent marijuana users. (Author Abstract)

Prevention

1. Bamberger M. An alcohol prevention/intervention program in a high school. *School Soc Work J* 10(1):24-29, 1985. (9 refs)
Statistics show that in the United States, there are twelve to fifteen million school age children of alcoholics. Often these children deny their parents' drinking problems. The drop-in room program in a Chicago, Illinois high school was established to provide an informal opportunity for students to discuss and share their many concerns, including parental drinking. For those students who identified themselves as children of alcoholics, an educational/therapeutic subgroup was formed to provide more information and opportunity to discuss their particular problems in more detail. (Author Abstract)

2. Daley D. Relapse prevention with substance abusers: Clinical issues and myths. *Soc Work* 32(2):138-142, 1987. (24 refs)
The author discusses the problem of relapse with alcoholics and other drug abusers from three perspectives: client related variables, common erroneous beliefs, and myths held by professionals regarding relapse. Proposed solutions are offered and a relapse prevention model is described. This article integrates clinical experience, relapse literature, and data collected on 150 patients who completed treatment. (Author Abstract)

Special Populations

1. Anderson S; Henderson D. Working with lesbian alcoholics. *Soc Work* 30(6):518-525, 1985.
This article, based on a critical review of the current literature, examines alcohol problems among lesbians. Specific areas discussed include the incidence and prevalence of alcohol problems among lesbians, lesbian identity and experience, the relationship between lesbianism and alcoholism, and treatment strategies and issues. Finally, recommendations concerning the research and treatment needs of this group are offered. (Project Cork Institute)

2. Anderson S. Alcoholic women: Sex-role identification and perceptions of parental personality characteristics. *Sex Roles* 11(3-4):277-287, 1984. (21 refs)
Thirty alcoholic women were compared with their nonalcoholic biological sisters on several measures of sex-role identification and a checklist of parental personality characteristics. Both groups are more masculine than the female norm in sex-role style and gender identity, but these scores are unrelated to parental descriptions. Sisters describe their parents similarly, and these descriptions do not support the stereotype of alcoholic women having masculine mothers and feminine fathers. Nonalcoholic sisters perceive themselves to be more similar to their mothers in attitudes and interests, regardless of whether the mother is described as stereotypically feminine or masculine. It is concluded that sex-role identification research on alcoholic women has been based on theoretical models which exclude complex sets of interacting variable, resulting in equivocal finds. (Author Abstract)

3. Anderson S. Alcoholic women on skid row. *Soc Work* 32(4):362-365, 1987. (9 refs)
This study of twenty alcoholic women in treatment from the skid row area of Portland, is a replication of E. M. Corrigan and S. C. Anderson's study of skid row women in the Bowery, New York. [Homeless Alcoholic Women on Skid Row, *The American Journal of Drug and*

Alcohol Abuse, 10:535-549, 1984.] The subjects shared many characteristics with the women in the New York study, but were different in the following respects: had more formal education, were younger at the onset of problem drinking, had experienced a more rapid progression of alcoholism, were more involved with other drugs and dual addiction, had a higher rate of prior involvement in AA, and were more likely to have maintained consistent contact with their children. On the basis of the latter the author questions the "disaffiliated" image of skid row women. There is also discussion of the implications for social work practice. (Project Cork Institute)

4. Arévalo R; Minor M, eds. *Chicanas and Alcoholism: A Socio-Cultural Perspective of Women*. San Jose CA: School of Social Work, San Jose State University, 1981. 55 pp.
This monograph is based on the training activities and research conducted by the Clinical Alcoholism Project of the School of Social Work at San Jose State University. This project was funded by the National Institute on Alcohol Abuse and Alcoholism. Its purpose was to develop curriculum in the field of alcohol abuse in relation to Chicanos, Blacks and women and to promote the entry of Social Workers into the field of alcoholism. (Author's Abstract)

5. Caputo L. Dual diagnosis: AIDS and addiction. *Soc Work* 30(4):361-364, 1985. (17 refs)
This article directed to social workers suggests a framework for understanding the psychosocial impact of AIDs on clients who are intravenous drug users. It also explores the profession's potential contribution to serving this population. This was originally published in 1984, in *Aids Update*, a publication of Adelphi University's School of Social Work. In light of the strides in scientific research and the rising numbers of those with AIDs since this was published, the work has a naive tone. Nonetheless, it provides a crisp, succinct introduction to the range of social work roles vital in treatment services to this population. (Project Cork Institute)

6. Icard L; Traunstein D. Black, gay, alcoholic men: Their character and treatment. *Soc Casework* 68(5):267-272, 1987. (23 refs)
Race, sexual orientation, and alcoholism are three significant sociopsychological factors that must be considered when treating black, gay, alcoholic men. Social workers must be aware of how the client's community support systems contribute to or detract from recovery efforts. (Authors' Abstract)

7. Mulinski P. Alcoholism and coexisting psychiatric disorders. *Soc Casework* 69(3):141-146, 1988. (21 refs)
Many clients have both alcoholism and mental health problems. Inexperienced clinicians may treat either the alcoholism or the psychiatric disorder, which results in fragmented or inadequate treatment. Uncoordinated service delivery systems may also undermine treatment. (Author Abstract)

8. Panepinto W; Garret J; Wilford W; Priebe J. A short-term group treatment for problem-drinking drivers. *Soc Work Group* 5(1):33-40, 1982. (9 refs)
Problem-drinking drivers have, from the outset of the New York State Program in 1975, presented a real challenge to alcoholism treatment providers. The very nature of the mandated condition of treatment as a prerequisite for return of a driver's license lends itself to resistance and rage. A short-term group treatment model is a response to the difficulties encountered in fitting the problem-drinking driver into a treatment system that is primarily designed for latter stage-alcoholics in need of long-term, intensive rehabilitation. The short-term group approach is an application of situational crisis

theory, adjustment demand theory, and treatment contracting. The intervention model begins with two individual/family evaluation sessions followed by from twelve to sixteen group therapy sessions of ninety minutes duration each. (Authors' Abstract)

9. Schinke S P; Gilchrist L D; Schilling R F; Walker R. Preventing substance abuse among American Indian and Alaska Native youth: Research issues and strategies. *J Soc Ser Res* 9(4):53-67, 1986. (56 refs)
Research on the prevention of substance abuse among American Indian and Alaska Native youth offers challenges and demands careful methods. This article describes such chal-lenges in terms of philosophical, political, and cultural issues surrounding substance abuse prevention research with American Indian and Alaska Native people. The authors suggest how social work researchers can address these issues through strategies of community collaboration, goal setting, and cultural sensitivity. The paper discusses the limits, implica-tions, and future applications of the described strategies for research on the prevention of alcohol and drug abuse among American Indian and Alaska Native youth. (Authors' Abstract)

10. Schinke S; Schilling R; Gilchrist L; Barth R; Bobo J; Trimble J; Cvetkovich G. Preventing substance abuse with American Indian youth. *Soc Casework* 66(4):213-217, 1985. (29 refs)
Substance abuse is one of the worst problems experienced by American Indian people. In this article, methods to prevent substance abuse among Indian young people are described and the future implications of drug and alcohol abuse prevention efforts with Indian youth are discussed. (Authors' Abstract)

11. Solomon P; Davis J M. The effects of alcohol abuse among the new chronically mentally ill. *Soc Work Health Care* 11(3):65-74, 1986. (9 refs)
In recent years, there has been a growing recognition of the high incidence of alcohol abuse among the new generation of chronically mentally ill. This article reports on a study that tracked a subgroup of the chronically mentally ill, those discharged from state psychiatric hospitals, through an entire community mental health aftercare system and its major auxiliary human service agencies. Those who were assessed by hospital discharge social workers as having a need for alcoholism services were found to be less likely to be referred for aftercare and to make contact with aftercare agencies post discharge; and for those with an alcoholism problem who do make contact, they generally received less service than those who did not have a need for alcoholism services. The professionals in both the mental health and alcoholism fields need to work together to better meet the needs for the chronically mentally ill with an alcohol problem. (Authors' Abstract)

12. Solomon P; Gordon B; Davis J. Assessing the service needs of the discharged psychiatric patient. *Soc Work Health Care* 10(1):61-69, 1984. (8 refs)
In recent years the chronically mentally ill have come to be regarded as a heterogeneous population with a diversity and multiplicity of needs. Social workers assessed a cohort of psychiatric patients being discharged from two state hospitals in terms of their postdischarge service needs. The findings confirmed that these patients needed not only basic mental health services of chemotherapy and counseling but also social rehabilitative services and specialized services such as substance abuse counseling. The data have been utilized by agencies and state and county governmental entities to document the need for new programs and to reorder service priorities. To start a planning process, recommendations on the study findings are being distributed to mental health and human service agencies and family coalitions on a community wide basis. (Authors' Abstract)

13. Ziter M. Culturally sensitive treatment of black alcoholic families. *Soc Work*

32(2):130-135, 1987. (25 refs)
Attention to the concepts of empowerment, of bicultural counseling, and of the dual perspective enhances the practitioner's cultural sensitivity and effectiveness in treating black alcoholic families. In this article the author proposes modification of Problem-Centered Systems Therapy—a practice model for assessment and treatment—that address bicultural counseling with black families in general and black alcoholic families in particular. (Author Abstract)

The Workplace—Employee Assistance Programs, Fugitive Literature

Note: The fugitive social work materials on alcohol and other drugs and the workplace have were identified, selected and annotated by Professor Paul A. Kurzman, Hunter College School of Social Work.

1. Abrams L. An employer's role in relapse prevention. *The ALMACAN* 17(7):20-22, 1987.
This article by an experienced social work practitioner in the substance abuse arena, stresses the employer's responsibility for preventing the relapse of workers who have completed detoxification, rehabilitation and aftercare programs. Rather than focusing primarily on the family, Abrams suggests that employers are in the pivotal position in relapse prevention. He looks at the subtle enabling systems often built into the workplace, and the work culture often present to support drinking rather than sobriety.

2. Akabas S; Kurzman P. *We are Now at Work to Help You Safeguard Your Most Valuable Resource. . . People*. 1981.
This eighteen page envelope size brochure provides a sophisticated presentation of occupational/industrial social work to a labor and industry audience. Alcoholism is presented as one of the problems with which social workers in EAPs and MAPs can be effective in work settings. Examples of substance abuse in the workplace are provided, along with model programs and interventions.
Contact: S.H. Akabas, Columbia University, 622 W. 113 St., NY NY, 10025. 212/854-5173; or P.A. Kurzman, Hunter College, 129 E. 79 St., NY NY, 10021. 212/452-7035.

3. Akabas S; Kurzman P; Kolben N, eds. *Labor and Industrial Settings: Sites for Social Work Practice*. 1979.
This monograph reports the first national conference of social workers practicing in labor and industrial settings, held in 1978, in New York City. It includes a profile of twelve EAP programs, including several with a strong occupational alcoholism focus.
Contact: S.H. Akabas, Columbia University, 622 W. 113 St., NY NY, 10025, 212/854-5173; or P.A. Kurzman, Hunter College, 129 E. 79 St., NY NY, 10021. 212/452-7035.

4. Bell T. Occupational relapse prevention planning. *EAP Digest* 9(3):31-35, 1989.
The author, a professional social worker and former EAP director at Borg-Warner Chemicals International, presents an innovative model to prevent relapse for recovering alcohol and drug abusers. Deploying both organizational and clinical insight, she uses the inherent strength of the workplace to design a relapse prevention strategy that is cost-effective and humanitarian in conceptualization and implementation.

5. Bruner K. The Human Touch. *Employee Assistance* 1(8):12-16, 1989.
The article features an usual workplace program at General Motors that is under joint labor-management auspices, and co-directed by an elected union leader and an

experienced professional social worker. While the EAP serves a wide range of presenting problems, the social worker, (Daniel Lanier) underscores the importance of training in chemical dependence for EAP workers. He describes the 12-step programs that have been incorporated into the GM workplace, along with a variety of labor-management strategies to encourage self-referral and early intervention.

6. Bureau of National Affairs. *Alcohol and Drugs in the Workplace: Costs Controls, and Controversies*. Washington DC: Bureau of National Affairs, 1985.
Prepared by the Labor Special Projects unit of Bureau of National Affairs (BNA), this report includes an overview of workplace substance abuse problems and corporate rules and policies regarding abuse. The components, as well as outcomes, of EAPs are discussed, along with potential employee-management conflicts. Liability issues are presented, including those related to drug testing, safety, and privacy rights. Case studies and examples from various businesses and unions are included throughout the publication, and future issues are also introduced. Social work, along with other participating disciplines, is discussed as a significant EAP participant.
Bureau of National Affairs, 1251 25th Street NW, Washington DC, 20037. 202/452-4200.

7. Cook D. Companies put social workers on the payroll. *Industry Week*. September 21:73-79, 1981.
This formative article was published in a magazine not often read by the helping professions. The author highlights the profession of social work as perhaps uniquely suited to perform workplace interventions, including (but not limited to) serving the chemically dependent worker, the enabling supervisor, and the co-dependent family member. The need for more specific graduate training of social workers in occupational/ industrial social work policy and practice is noted, and more specific preparation in the arena of substance abuse is recommended.

8. Corporate Samaritans. *Working Woman*. 8(January):84-90. 1983. 4 pp.
This popular magazine article makes a persuasive case for developing EAPs at the workplace, with a strong focus on alcoholism and drug abuse. Citing several EAP programs directed by professional social workers (Chemical Bank, International Paper, U.S. Steel, Polaroid, Cornell, Personal Performance Consultants, etc.), the staff writer, (herself a trained social worker) outlines the strengths inherent in a comprehensive EAP that still maintains a strong commitment to reaching and serving the chemically dependent worker.

9. Council on Social Work Education. *Educational Research Material for Social Work Practice in Labor And Industrial Settings*. Washington DC: Council on Social Work Education, August 1979.
The monograph is a useful summary of the curricula ten years ago in the graduate schools of social work giving leadership to the development of occupationally based services. The report includes model course outlines, reference bibliographies and reprints with substance abuse specific content.

10. Dogoloff L; Angarola R. *Urine Testing in the Work-Place*. Rockville MD: American Council for Drug Education, 1985.
This work brings clarity and rationality to an issue that has become emotionally loaded. The monograph places urine testing in perspective by viewing it as part of an overall program for addressing drug use in the workplace. It discusses the legal issues that should be considered prior to developing an employee drug program and provides a blueprint for understanding the technical issues involved in drug urinalysis. The monograph explains the analytical methods used for testing and offers criteria for

selecting a laboratory and interpreting urinalysis results. The primary author, as a trained social work practitioner, takes a strong ethical position on the topic.
Contact: The American Council for Drug Education, 204 Monroe St., Rockville MD, 20857. 301/294-0600.

11. Dogoloff L; Brugger T; MacDonald S. *Working Toward a Drug-Free Future*. Rockville MD: The American Council for Drug Education, 1987.
Working Toward a Drug-Free Future is a flexible, year-long drug awareness program designed to give employees the facts about how drugs and alcohol affect them, their families, and their co-workers. Specifically, the program consists of 12 drug awareness pamphlets, a series of three posters, and a manager's handbook. The pamphlets contain clear information about individual drugs and can be distributed as payroll stuffers, mailers, or handouts. The posters dramatize the effects of drug abuse. The manager's handbook outlines a step-by-step process for introducing and managing the program and a variety of additional activities that can be used to augment the messages in the pamphlets. This series enables a company or agency to take a first step toward drug abuse prevention in the workplace and the community. The materials were developed by Lee Dogoloff, the Council's Executive Director, who is a professional social worker.
Contact: The American Council for Drug Education, 204 Monroe St., Rockville MD, 20857. 301/294-0600.

12. Googins B. Two Parallel Plans of Attack: Drug Testing at the Workplace. *Employee Assistance* 1(8):1&45, 1989.
A prominent occupational/industrial social-work educator looks at the current issue of drug testing at the workplace. Googins is critical of the current efforts to test widely, and to misuse supervisors in this effort. He suggests that EAP professionals have to be more proactive on this particular issue in order to prevent the misapplication of workplace resources in this regard.

13. Googins B. The Use and Implementation of Occupational Alcoholism Programs by Supervisors. *Dissertation Abstracts International*: 40(4):2269-A, 1979.
One of the first doctoral dissertations, (Florence Heller Graduate School For Advanced Studies in Social Welfare, Brandeis University) by an occupational/ industrial social worker featuring alcoholism at the workplace as the item for investigation. Using both quantitative and qualitative research methods, the author, currently Associate Professor of Social Work at Boston University, evaluates models of intervention with alcoholics at work, using the leverage provided by a sample of 40 supervisors referring alcoholic workers in situations of supervisee job jeopardy. The need for adequate training of all supervisors to perform this function is stressed.

14. Gray M; Lanier D. *Employee Assistance Programs: A Guide for Counselors*. Performance Resources, 1987.
This monograph, authored by two professional social workers with extensive worksite experience, focuses well on specific guidelines for EAP counselors, whether or not they have had prior formal or professional mental health or substance abuse training. It discusses both alcohol and drugs, as well as the frequency of cross-addiction.
Contact: Performance Resources, 2145 Crooks Road, Troy MI, 48084. 313/643-9580.

15. Hauge C. Description and Evaluation of Centralized Alcohol Rehabilitation Programs in the U.S. Air Force. *Dissertation Abstracts International*: 40(6):3535-A, 1979.
The author, using a variety of research instruments, evaluated the performance of the U.S. Air Force's ten alcohol treatment centers, in a study conducted for his DSW dissertation (School of Social Work, University of Utah). As a professional social worker, he looked

at the use of a work-based, centralized rehabilitation model, with a focus on a sample of 119 patients.

16. Hudson H. Program rehabilitates alcoholics, alleviates personal problems. *Hospitals* 52(October 16):83+ 1986.
The author discusses the model of an inhouse EAP jointly run by certified alcoholism counselors and professional social workers in a hospital setting. The ability to reach and serve workers with drug and alcohol problems—as well as those who have serious personal and emotional problems—is clearly one of the benefits of a program that brings staff expertise in both the chemical dependence and mental health arenas.

17. Hunter College EAP. *Alcoholism: A Family Disease and Alcoholism in Our Society Today*. New York: Hunter College, 1988. (also Spanish edition).
These companion brochures were developed by the EAP of Hunter College (CUNY) in cooperation with the Christopher Smithers Foundation, and are directed toward encouraging self and peer referral of alcoholic workers and family members. The focus is upon "facts" versus "myths" surrounding the disease of alcoholism, and the effectiveness of an onsite EAP in providing intervention early in the cycle of alcohol dependency and co-dependency.
Contact: P.A. Kurzman, Hunter College, 129 E. 79 St., NY NY, 10021. 212/452-7035.

18. Jorgensen L. Social Work in Business and Industry. *Dissertation Abstracts International* 40(04):2271-A, 1979.
This early doctoral dissertation (undertaken at the School of Social Work, University of Utah) on the emerging field of industrial/occupational social work practice looks at both internal and external programs. The author, currently Associate Professor of Social Work at the University of Utah, discusses substance abuse, in general, and alcoholism, in specific, in some detail as a primary target for workplace prevention and treatment intervention.

19. Judd P. Treatment Success in Occupational Alcoholism Programs. *Dissertation Abstracts International* 41(05):2294-A 1980.
This dissertation (Florence Heller Graduate School For Advanced Studies in Social Welfare, Brandeis University) examined one hundred and seventy-three male alcoholics, employed by a private corporation in the Detroit area, participating in an EAP intervention program staffed by social workers and recovering personnel. The author reports clear improvement as a result by a majority of the employees.

20. Masi D. *Drug Free Workplace*. Washington DC: Buraff Publications, 1987.
This book contains what one needs to know to plan, implement,and evaluate a company's efforts to achieve a drug-free workplace. Based on her experience with more than 100 companies, Dale Masi explains her program that interweaves the EAP, drug testing, education, medical, security, and evaluation programs. She also includes the effects—both hidden and obvious—of alcohol and drug abuse in the workplace, and tells how to estimate the costs of drug and alcohol abuse to an organization. Her perspective as a social work educator and administrator emphasizes the need for professional expertise.

21. Milstead-O'Keeffe R. *Empowering Women Alcoholics to Help Themselves and Their Sisters in the Workplace*. Union of Experimenting Colleges and Universities, 1980.
This dissertation by an experienced social worker, using a participant observer research model at the Community Agency for Labor and Management, focuses upon working women. She recommends a self-help, mutual aid and empowerment model for the alcoholism recovery of working women. Following the principles of Women for

Sobriety, a group program is explored, emphasizing self-profiling, women's identity, education and social action.
Available through Inter-Library Loan. Contact: Library, Union Institute Graduate School, 632 Vine St., Cincinnati OH, 45202. 513/621-6444.

22. Myron B. *Help for the Troubled Employee*. New York: Public Affairs Committee, 1982.
A remarkably well written, 24-page, 5"x7" pamphlet featuring the role of internal and external EAPs. Excellent examples of troubled workers are presented, featuring alcoholism and co-dependency as presenting problems. Leading social work practitioners are featured and quoted as authoritative sources of information on the effectiveness of worksite programs in reaching and serving chemically dependent workers and their families.
Contact: Public Affairs Committee, 381 Park Avenue South, New York, 10016. 212/683-4331.

23. NASW. *Drug-Testing in the Workplace: Guidelines for the Profession*. New York: New York City Chapter, NASW, March, 1989.
The leading professional organization of social workers, through their second largest local chapter, produced a conceptually sophisticated statement with regard to current drug testing initiatives at the worksite. They offer a fundamental opposition to the concept of random drug-testing. They only support performance-based testing upon probable cause, and using reliable and confidential testing procedures. The ethical issues for social workers in EAP settings are reviewed and underscored.
Contact: Industrial Social Work Commiuee Task Force of the NYC Chapter of NASW, 545 Avenue, New York, 10018. 212/947-5000.

24. National Institute on Drug Abuse. *Drug Abuse Curriculum for Employee Assistance Program Professionals*. Rockville MD: NIDA, 1989.
An extensive and sophisticated curriculum developed in six modules, each designed to be delivered in three hours. A number of handouts and worksheets are included to be used in the training sessions of EAP staff. An annotated bibliography is included with each module; six of the eight module authors are graduate social work faculty and/or social work practitioners. Available to EAP and Substance Abuse Professionals without cost. (ADM)89-1587
Contact: Office of Workplace Initiatives, NIDA, 5600 Fisher Lane, Rockville MD, 20857. 301/468-2600.

25. Walsh JM; Gust SW, eds. *Workplace Drug Abuse Policy: Considerations and experience in the business community*. Rockville MD: Office of Workplace Initiatives, National Institute on Drug Abuse, 1989. 122 pp.
The monograph is based upon papers and discussions from a conference, "Interdisciplinary Approaches to the Problem of Drug Abuse in the Workplace," held in 1986, convened by the National Institute on Drug Abuse (NIDA) with the goal of developing a consensus on the need to address drug abuse in the workplace, to define the essential procedures. This monograph, with chapters authored by nationally recognized experts in the field, reviews the issues related to drug abuse policy in the workplace, both the rationale and impetus for such policy, the legal and technical considerations, the human relations concerns, and then describes four successful programs. The concluding chapter presents the consensus statements on the major issues adopted by the conference to serve as guidelines for policy development.

26. Sonnenstuhl W; Harrison T. *Strategies for EAPs: The Crucial Balance*. Ithaca NY: Cornell University, 1986.
The authors argue that a balance must be struck in all EAPs between job jeopardy,

supervisory referrals (usually of alcohol and drug abusers), and self or peer referral (usually of workers with personal and emotional problems). By inference, the authors tend to be critical of social workers whom they perceive as wishing to tip the balance toward comprehensive EAP programs, thereby reducing the primary and historical commitment of EAPs to occupational alcoholism.

Contact: NY State School of Industrial and Labor Relations, Cornell University, Ithaca NY, 14851. 607/255-2264.

Section II

The Alcohol and Substance Abuse Literature

Comments

- This Section includes books and journal articles published in the literature on alcohol and other drugs, as opposed to the items in the previous Section, drawn from the Social Work literature.
- The materials selected have a generic rather than a specific profession or disciplinary orientation, and were selected for their utility to social work educators training social work clinicians.
- Many of the items have social worker authors and these individuals are designated by an asterisk.
- The bulk of materials are drawn from the academic, scholarly sources. "Lay," "popular," "alcohol counselor-oriented" pieces have been incorporated only when comparable information has not been identified in the established, formal literature.
- Materials have been assigned to categories following the same conventions as were outlined in the comments for Section I.

General Literature of the Alcohol and Drug Fields

1. Blume SB. *Confidentiality Of Patient Records In Alcoholism and Drug Treatment Programs*. New York: American Medical Society on Alcoholism and Other Drug Dependencies, Inc. and National Council on Alcoholism, Inc., 1987. 10 pp.

The pamphlet reviews the 1987 revisions of federal regulations governing confidentiality of alcohol and drug abuse patient records. It addresses the records covered by the regulations; types of communications covered; written informed consent; the application of consent to situations involving minors, incompetent or deceased persons; types of information to be released with consent, and the security of records. (Project Cork Institute)

2. Cooper JR; Altman F; Brown BS; Czechowicz D, eds. *Research on the Treatment of Narcotic Addiction: State of the Art*. Rockville MD: National Institute on Drug Abuse, 1986. 751 pp.

The volume reports the presentations and discussions of three symposia convened by the National Institute of Drug Abuse (NIDA). National experts from the scientific research and treatment communities were asked to define and critically review three major aspects of narcotic treatment. The book, organized into three corresponding sections, addresses the effects of methadone and other narcotics on users and their offspring; the technical and clinical issues associated with methadone maintenance and detoxification; and, treatment outcome in terms of patient and treatment characteristics. The volume presents and evaluates current research findings (and simultaneously addresses the clinical questions most frequently addressed to the National Institute). It defines "the state of the art" and is seen by the Institute as providing information needed to establish informed public policy and underpin clinical care to those with narcotics addiction. (ADM)87-1281. (Project Cork Institute)

3. Crider RA; Rouse BA *Epidemiology of Inhalant Use, NIDA Research Monograph 85*. Rockville MD: National Institute on Drug Abuse, 1989. 208 pp.

This monograph provides a review of epidemiology of inhalant use for three major populations using inhalants: youth, adolescent polydrug users, and inhalant dependent adults. The nine chapters, authored by national and international figures, focus upon specific populations such as young children, Native American youth, regional manifestations of inhalant use with perspectives from the rural southwest and northeast

cities, and also reviews the current issues in respect to inhalant use, as well as reviewing the social and psychological factors contributing to inhalant abuse. Each chapter has a bibliography. (ADM)88-1577. (Project Cork Institute)

4. Gorney B. Domestic Violence and Chemical Dependency: Dual Problems, Dual Interventions. *J Psychoactive Drugs* 21(2):229-238, 1989. (54 refs)
This article addresses the link between domestic violence and chemical dependency. Both are extremely prevalent and pose seriious threats to individualds, families, communities, and society at large. The commonly observed association between substance abuse and violent interactions has traditionally been explained as a cause-effect traditionally dominated research on the subject as well as treatment methodology. This interpretation may lead treatment providers to assume that once abstinence from alcohol and otehr drugs is achieved, violence will also disappear. Researchers in the field of domestic fiolence argue that vilence occurs both when substance abuse is present and absent. This article addresses the need to assess and traet both problem areas concurrently. In addition to providing assessment and treatment guidelines, the article describes the scope of the problem, etio.ogical issues, and factors that may serve as barriers to treatment providers in identifying violence as a problem in chemically dependent relationship systems. (Author Abstract)

5. Grabowski J, ed. *Cocaine: Pharmacology, Effects, and Treatment of Abuse, NIDA Research Monograph 50*. Rockville MD: National Institute on Drug Abuse, 1984. 136 pp.
This work reviews the scientific research and clinical issues concerning cocaine. It was written prior to the widespread introduction of "crack", a smokeable form of cocaine. It reviews the pharmacology of cocaine—absorption, onset, distribution, metabolism and behavioral correlates; the changing patterns of use. A review of the literature on treatment is included. (ADM)87-1326. (Project Cork Institute)

6. Harris LS, ed. *Problems of Drug Dependence 1987, NIDA Research Monograph 81*. Rockville MD: National Institute on Drug Abuse, 1988. 433 pp.
This volume assembles the scientific papers and poster presentations made at the 49th Annual Scientific Meeting of The Committee on Problems of Drug Dependence. It covers both alcohol and other substance use and the contents range from reports of basic physiological and pharmacological research to literature reviews on topics related to clinical care. A subject index is provided. (ADM)88-1564. (Project Cork Institute)

7. Jacobs MR; Fehr K O'B. *Drugs and Drug Abuse: A Reference Text*. Second Edition. Toronto, Canada: Addiction Research Foundation, 1987. 640 pp.
Drafted as a reference for judges and lawyers dealing with alcohol- and drug-related cases, this book is equally helpful to clinicians. Following an introductory chapter on "Understanding Drug Use" are chapters on the various classes of psychoactive agents, focusing upon the epidemiology, clinical manifestations of use, pharmacological properties, and the implications for treatment associated with each drug class. (Project Cork Institute)

8. *Kinney J; Leaton G. *Loosening the Grip: A Handbook of Alcohol Information*. Third Edition. St. Louis MO: The C. V. Mosby Co., 1987. 369 pp.
This text, widely used in social work education and other professional training programs, was initially developed from an alcohol counselor training course conducted by Dartmouth Medical School. Directed toward clinicians, it reviews and integrates the knowledge base derived from the various biological, medical, and social sciences related to treating the spectrum of problems resulting from alcohol use. It covers the historical

and current views of alcohol use and related problems, acute and chronic effects of alcohol use, definition and etiology and phenomonology of alcoholism, treatment techniques and modalities, from the point of screening through follow up, special populations, and issues for the clinicians, i.e. record keeping, confidentiality and indirect service responsibilities. (Project Cork Institute)

9. McLellan AT; Luborsky L; O'Brien CP; Barr HL; Evans F. Alcohol and drug abuse treatment in three different populations: Is there improvement and is it predictable? *Am J Drug Alcohol Abuse* 12(1&2):101-120, 1986. (21 refs)

Prior research had shown that alcohol and drug abuse treatments were effective and that the results of treatments could be predicted from pretreatment information regarding the patient's employment, family, and especially psychiatric problems. However, this research had been conducted entirely with adult male service veterans, largely from lower socioeconomic strata. Three treatment centers were included in the present study to examine these conclusions with other populations containing adolescents, females, and patients from higher socioeconomic strata. Data from the Addiction Severity Index was collected at treatment admission and again in an independent follow-up six months later. Results confirmed prior observations. Both alcohol and drug abuse treatments showed substantial improvements in the chemical use problems of their patients and in the important areas of employment, criminal behavior, family relations, and psychological health. As in earlier reports, a global measure of the nature and extent of pretreatment psychiatric problems was the single best predictor of treatment response for both alcoholics and drug-dependent samples. (Authors' Abstract)

10. MMWR. Human Immunodeficiency Virus Infection in the United States: A Review of Current Knowledge. *MMWR Supplement* 36(S-6):1987.
11. MMWR. AIDS and HIVI in U.S., 1988 Update. *MMWR Supplement* 38(S-4):1-38, 1989.

A publication of the Centers for Disease Control, the *Morbidity and Mortality Weekly Report (MMWR)* provides the most current information available on AIDS and HIVI, summarizing, for example, epidemiological data, research findings on etiology, transmission and populations at risk. In a field of such import for public health and undergoing rapid changes in knowledge, this is an authoritative source of information for all health care and human service professionals who deal with clients at risk. (Project Cork Institute)

12. National Institute on Drug Abuse. *Data from the Drug Abuse Warning Network (DAWN), Semiannual Report, Trend Data, through January to June 1987, Statistical Series G, Number 20*. Rockville MD: NIDA, 1988. 83 pp.

This work assembles the data collected through the Drug Abuse Warning Network (DAWN) a national data collection system established by the National Institute on Drug Abuse (NIDA), drawn from emergency room episodes and medical examiner cases involving cocaine, heroin/morphine/ marijuana, PCP, and other selected drugs. It provides data to assess trends in drug use, the prevalence of problems related to use, and the nature of health hazards. Data is reported in several formats: by 27 metropolitan areas, by drug classes semi-annually over a two year period, and both of these in relation to emergency room settings and by medical examiner cases. (Project Cork Institute)

13. National Institute on Drug Abuse. *Drug Abuse and Drug Abuse Research: The Second Triennial Report to Congress from the Secretary, Department of Health and Human Services*. Rockville MD: NIDA, 1987. 246 pp.

The Report summarizes the nature and extent of drug use problems, describes the current efforts in prevention research, treatment research, and in separate chapters discusses each

of the major classes of drugs of abuse. These include marijuana, stimulants, cocaine, sedatives and anti-anxiety agents, hallucinogens and inhalants, heroin and narcotics. There is also discussion of AIDS and a review of basic research on endogenous opiods. An executive summary is provided. (ADM)87-1486. (Project Cork Institute)

14. National Institute on Drug Abuse. *National Household Survey on Drug Abuse: Main Findings, 1985*. Rockville MD: NIDA, 1988. 173 pp.
This volume, part of an ongoing series, reports the results of a national survey regularly conducted by the National Institute on Drug Abuse (NIDA) to ascertain the prevalence of use of different classes of drugs, and the nature of problems accompanying use. The work is presented primarily in tables, with brief summaries of the major findings and trends. (Project Cork Institute)

15. National Institute on Alcohol Abuse and Alcoholism. *Sixth Special Report to the U.S. Congress on Alcohol and Health*. Rockville MD: NIAAA, 1987. 147 pp.
For 15 years the editions of the Special Report on Alcohol and Health have served as historical reference points and provided current documentation of progress in understanding the effects of alcohol on health. This volume, as the preceding ones, is a valuable reference tool: It contains a wealth of current data, with summaries of the major topics of current interest, statistical information well displayed in numerous tables and charts, and has an extensive supporting bibliography. (Project Cork Institute)

16. Pickens RW; Svikis DS, eds. *Biological Vulnerability to Drug Abuse, NIDA Research Monograph 89*. Rockville MD: National Institute on Drug Abuse, 1988. 185 pp.
This monograph is assembled from papers presented at a technical review conducted by The National Institute on Drug Abuse (NIDA). The topics include an overview of genetic vulnerability to substance abuse; a review of animal research; discussion of the three classical research paradigms used to identify genetic risk, i.e. family pedigree studies, the twin method and adoption studies; the role of personality factors, individual differences in responses to drugs, and the role of psychopathology in familial transmission of drug abuse. The concluding discussion centers upon the implications for, and applications to both treatment and prevention efforts.(ADM)88-1590. (Project Cork Institute)

17. Rinaldi RC; Steindler EM; Wilford BB; Goodwin D. Clarification and standardization of substance abuse terminology. *JAMA* 259(4):555-557, 1988. (9 refs)
A four stage Delphi survey of substance abuse experts was conducted to help achieve greater clarity and uniformity in terminology associated with alcohol and other drug-related problems. This multidisciplinary group of experts was asked to reach a consensus on alcohol and other drug-related terms and definitions. Results produced a list of fifty substance abuse terms deemed important, along with the most agreed on definition for each term. (Authors' Abstract)

18. Schuster CR. The United States' drug scene: An overview. *Clin Chem* 33(11B):7B-12B, 1987. (8 refs)
The author, the Director of the National Institute on Drug Abuse (NIDA), using data from four surveys regularly conducted by NIDA, reviews the nature and extent of the problems of drug use nationally, with particular emphasis on the most frequently abused substances, i.e. marijuana, alcohol, and cocaine. The implications for the workplace are discussed, in respect to the resulting economic costs, the opportunities for intervention that the workplace offers, questions arising around drug testing in the workplace, and current federal policy directed toward creating a drug free workplace. (Project Cork Institute)

19. Seigel L, ed. *Advances in Alcohol and Substance Abuse. The Acquired*

Immunodeficiency Syndrome (AIDS) and Substance Abuse 7(2):1-206 (entire issue), 1987.
The entire issue is devoted to AIDS. It provides medical update, discusses substance abuse treatment for those at risk or with AIDS, the epidemiology and projections for the distribution of future cases, and public and social policy issues. (Project Cork Institute)

20. Seigel L; Korcok M. *AIDS: The Drug and Alcohol Connection*. Center City MN: Hazelden, 1989. 105 pp.
The book reviews the medical-scientific data on AIDS and HIV spectrum disease, its epidemiology, and the interface between drugs and AIDS. It presents interviewing, counseling, and treatment approaches to the alcohol or drug dependent client and discusses the issues of testing, liability, and confidentiality. (Project Cork Institute)

21. Simpson DD; George WJ; Lehman WEK. *Addiction Careers: Summary of Studies Based on the DARP (Drug Abuse Reporting Program) 12 Year Follow-up*. Rockville MD: National Institute on Drug Abuse, 1988. 22 pp.
This report summarizes the 12 year follow-up of a cohort of 490 individuals who had participated in the Drug Abuse Reporting Program (DARP). The study is addressed to defining the concept of "addiction career", i.e. the initiation, duration, and cessation of drug use in terms of environmental, social and psychological influences. The summary focuses upon three domains as predictors of outcome: the reasons for opiod use, the length of addiction, and treatment history. (ADM)88-1420. (Project Cork Institute)

22. Vaillant GE. *The Natural History of Alcoholism*. Cambridge MA: Harvard University Press, 1983. 359 pp.
A longitudinal prospective study of adult development involving two cohorts provided the opportunity to examine the natural history of alcoholism. The significant findings are as follows: 1) There was a lack of support for the theory of an "alcoholic personality." The presumed "predisposing personality factors" or emotional problems, in actuality, result from drinking. 2) The major predictors of alcoholism are a positive family history, being raised in a culture whose norms proscribe childhood alcohol use, prescribe heavy adult alcohol use, and accept intoxication. 3) In respect to diagnosis, by the time individuals have experienced four life-time problems from use, typically they will meet any diagnostic criteria for alcoholism. 4) However, treatment was not initiated until the occurrence of 8-11 life-time problems. 5) After alcohol dependence is established, the two most common eventual outcomes are recovery or death: over the thirty year follow-up, non-problematic drinking continually declined. 6) Successful recovery is associated with four factors: developing a vital interest that can replace the role of drinking, external reminders that drinking is painful, increased sources of unambivalently offered social support, and the presence of a source of inspiration, hope, and enhanced self-esteem. (Project Cork Institute)

23. Wilford BB. *AMA Handbook on Alcohol and Drug Abuse*. Chicago IL: American Medical Association. In press.
This new volume will update and combine two previously separate publications—the popular *Manual on Alcoholism* and *Drug Abuse: A Guide for the Primary Care Physician*. The Handbook is to provide guidelines for physician involvement in the care of alcohol and drug dependent patients, and review the etiology and epidemiology of alcohol and drug problems, the psychopharmacology of different drug classes, the clinical management of acute alcohol- and drug-induced problems, the associated medical complications, as well as discuss related legal issues. The Handbook will deal with the topic of physician impairment related to alcohol and drug use. A guide to street terminology of drugs is to be included. (Project Cork Institute)

24. Windom RE, ed. Perspectives on Alcohol Abuse. *Public Health Reports* 103(6):557-728 (entire issue), 1988.

This issue, devoted entirely to alcohol issues, is comprised of invited papers by nationally recognized experts, in areas ranging from the economic impact of problems of alcohol use to research findings in programmatic, social, and biological research. It serves as an excellent update and overview of the field. (Project Cork Institute)

Early Intervention and Treatment

Note: The items here are primarily generic. Materials focused upon early intervention and treatment addressing distinct populations have been incorporated either within "The Family" (if portions of the family, i.e. spouse or children; or if age-defined groups, such as the elderly or adolescents) or are located within "Special Populations", if the material addresses minority, ethnic, or high risk groups.

1. Brown S. *Treating the Alcoholic: A Developmental Model of Recovery*. New York: John Wiley & Sons, Inc, 1985. 347 pp.

Directed to clinicians, and using case material, stages of recovery are identified: drinking, the transition from drinking to abstinence, the early stages of recovery, and ongoing recovery. Central therapeutic tasks are specified for each stage. There is an emphasis on the mutually reinforcing contributions of professional therapy and AA in recovery. Sources of misunderstanding and common misconceptions about these two approaches are discussed. (Project Cork Institute)

2. Gallant DM. *Alcoholism: A Guide to Diagnosis, Intervention, and Treatment*. New York: W.W. Norton & Co, 1987. 256 pp.

This volume reviews the major topics of importance to clinicians. It covers the following topics: definitions and diagnosis of alcoholism; the pharmacology of alcohol and alcoholism; genetic, cultural and psychologic aspects of alcoholism; early intervention and diagnosis with discussion of the interviewing process, early symptoms, differential diagnosis and the indications for referral for psychiatric consultation; specialized treatment approaches to early intervention, using illustrative case histories; medical aspects including the physical sequelae, the management of detoxification and withdrawal, and the use of pharmacologic agents during treatment; treatment settings, i.e. inpatient, outpatient; and briefly discusses prevention. (Project Cork Institute)

3. Hawkins JD; Catalano RF; Gillmore MR: Wells EA. Skills training for drug abusers: Generalization, maintenance, and effects on drug use. *J Consult Clin Psyhchol*. 7(4):559-563, 1989. (19 refs)

This study reports on the follow-up data for the treatment of drug abuse (Hawkins, Catalano & Wells, 1986). In the original study, 130 clients in the reentry phase of residential drug treatment programs were randomly assigned to a control group (n=60) or to a 10-week supplemental behavioral skills training course (n-70). Eighty-two percent of the sample was male, and 75% was White. Subjects' ages ranged from 15 to 55 years, though the majority (71%) were in their twenties. A role-play test assessing skill levels was administered as a pretest, following the 10-week skill training course, and again at 6 and 12 months as follow-ups. Although skills decayed slightly over time, the Generalization of skills to role-play situations for which no training had been received was also found. However, with the exceptions of marijuana and amphetamine use, skill training did not affect drug use after treatment. (Author's Abstract)

4. Hester RK; Miller WR. *Handbook of Alcoholism Treatment Approaches*. Elmsford NY: Pergamon Press, 1989. 291 pp.
This multi-authored handbook discusses evaluation and motivation, primary treatment approaches, other types of intervention, and matching individuals with interventions. While much of the subject matter is similar to other general works, unique features are (1) the discussion of motivation for change and using the natural process for initiating change to engage the client into treatment, and (2) interventions based upon behavioral approaches, eg. relapse prevention, social skills training, and anxiety and stress management. (Project Cork Institute)

5. Johnson Institute. *How to Use Intervention in Your Professional Practice: A Guide For Helping-Professionals Who Work With Chemical Dependents and Their Families*. Minneapolis MN: Johnson Institute Books, 1987. 115 pp.
The Guide discusses the adaptation to different clinical settings of a therapeutic approach to promote substance abuse treatment. This approach is termed "intervention." The technique was first introduced in the alcohol field at a time when the accepted view was that neither a referral or successful treatment was possible until an individual "asked for help." Special issues and concerns about the use of the intervention process are addressed and additional resources provided. (Project Cork Institute)

6. McLellan TA; Luborsky L; Cacciola J; et al. *Guide to the Addiction Severity Index: Background, Administration, and Field Testing Results*. Rockville MD: National Institute on Drug Abuse, 1988. 51 pp. (34 refs)
This monograph reviews the Addiction Severity Index (ASI), which is a structured interview, designed for administration by a trained technician, taking approximately 45 minute to administer, suitable for clients who abuse alcohol or other substances, and designed for both male and female clients. The interview collects objective and subjective information in seven problem areas—alcohol use, medical condition, drug use, employment /support, illegal activity, family/social relations, and psychiatric function. From this a ten-point rating of severity is obtained for each problem area. The ASI is suited for research purposes, diagnostic screening, and for assessing changes at intervals of a month or longer. The monograph describes the background of the Index and impetus for its development, describes its design and the studies to establish reliability and validity, reviews the strengths and limitations of the Index, and provides instructions for administration. Appendices include a copy of the Index, instructions for scoring, plus instructions for computer coding and data entry. (Project Cork Institute)
Sources of assistance in training and scoring include videotape samples of an ASI interview and computer scoring systems. Contact: Lester Luborsky, M.D., 207 Piersol Building, G 1, Hospital of the University of Pennsylvania, 3400 Spruce Street, Philadelphia PA, 19104.

7. Miller WR. Motivation for treatment: A review with special emphasis on alcoholism. *Psychol Bull* 98(1):84-107, 1985. (272 refs)
Motivation is often regarded as a client attribute related to maladaptive defense mechanisms, and is used to explain unfavorable treatment outcome. This article provides an integrative review of research relating motivational variables and interventions to treatment entry, compliance, and outcome; special focus is on alcoholism and other addictive behaviors. Empirical evidence is considered regarding motivational interventions including advice, feedback, goal setting, role playing, modeling, contingencies, continuity of care, voluntary choice, and modification of behavior attractiveness. Beyond these specific interventions, nonspecific aspects of motivation are reviewed including client characteristics (stress, self-esteem, locus of control, severity, conceptual level), environmental variables, and therapist characteristics (hostility,

expectancy, empathy). A dynamic conceptualization of treatment motivation is proposed as an alternative to a trait model. (Author Abstract)

The Family

1. Ackerman RJ, ed. *Growing in the Shadow: Children of Alcoholics*. Pompano Beach FL: Health Communications, Inc., 1986. 234 pp.
This edited work, with 21 contributing authors active in the field nationally, serves as both an introduction to the topic, and an introduction to the approaches to this topic that are associated with each contributor. Beyond covering the basic material on children of alcoholics, the work is notable for its attention to children of alcoholics in ethnic populations, i.e. Hispanics, Native Americans, and Black Americans, and also among those who are professionals working in the alcoholism field. (Project Cork Institute)

2. *Bachur J. A social work perspective. *Gerontologist* 26(6):614-617, 1986. (5 refs)
The case of Mr. S illustrates the two broad categories of drug misuse in the elderly: self-medication and physician-induced misuse. The misuse is discussed at five levels of analysis, including those of the individual, family members, informal helpers in the community, and social policies affecting care. Though many things about the care of Mr. S. leaves much to be desired, the home health agency staff provided him with splendid clinical and financial support. (Author Abstract)

3. Barnes G; Farrell M; Cairns A. Parental socialization factors and adolescent drinking behaviors. *J Marriage Fam* 48(1):27-36, 1986. (45 refs)
From family socialization theory, it is hypothesized in this study that parents, as models and as agents of socialization, influence the development of various types of drinking behaviors in their children. In-home interviews were conducted with a representative general population sample of adolescents from 12 to 17 years old and their mothers and fathers. The findings revealed that adolescent drinking can be explained in part by parental models of drinking behavior; for example, heavier-drinking parents were more likely than other parents to have adolescents who were also heavier drinkers. Parental socialization factors, particularly support and to a lesser degree control, were also shown to have an effect on the development of adolescent drinking behaviors. It was concluded that the family socialization process should be considered as a critical element in the prevention of problem behaviors such as alcohol abuse. (Authors' Abstract)

4. Barnard CP; Spoentgen PA. Children of alcoholics: Characteristics and treatment. *Alcoholism Treat Q* 3(4):47-65, 1986. (29 refs)
This article reports results of a study designed to determine differences among three populations: college-aged children of alcoholics seeking treatment; college-aged children of alcoholics not seeking treatment, and a control group of college-aged children of non-alcoholics. Further, outcome data was gathered with regard to the children of alcoholics treatment groups populated by subjects of this study. Significant differences were determined among the three groups studied, and support was determined for the therapeutic value of group treatment with children of alcoholics. (Authors' Abstract)

5. Black C; Bucky SF; Wilder-Padilla S. The interpersonal and emotional consequences of being an adult child of an alcoholic. *Int J Addict* 21(2):213-231, 1986. (22 refs)
The purpose of this study was to compare adults raised in an alcoholic home (N=409) with those adults raised in a nonalcoholic home (N=179) on their perceptions of alcohol-related differences in the home, violence, sexual abuse, communication, and interpersonal

differences experienced as adults. The adults who were raised in alcoholic families 1) reported significantly less utilization of interpersonal resources as a child; 2) had significantly more family disruptions characterized by a higher divorce rate and premature parental and sibling death; 3) reported more emotional and psychological problems in adulthood; 4) experienced more physical and sexual abuse as children; and 5) more frequently became alcoholic and married alcoholics when compared to adults raised in nonalcoholic families. (Authors' Abstract)

6. Blum RW. Adolescent substance abuse: Diagnosis and treatment issues. *Pediatr Clin N Am* 34(2):523-527, 1987. (60 refs)

This paper addresses the spectrum of issues relevant to adolescent substance abuse. The topics discussed include the critical variables in relation to adolescent substance use, the natural history of adolescent drug use, the assessment of drug abuse focusing upon the psychosocial, biomedical, and school spheres with a suggested assessment protocol, the differences between assessment of adolescents and adults, techniques for getting reliable information, treatment outcome and the predictors of outcome. (Project Cork Institute)

7. Brook JS; Lettieri DJ; Brook DW, eds. Alcohol and Substance Abuse in Adolescence. *Adv Alcohol Subst Abuse* 4(3-4) 1-206 (entire issue), 1985.

This special issue is devoted entirely to adolescence and problems of alcohol and other drug use. The major topics include: a review of models and explanations of drug abuse, a developmental perspective on abuse, the epidemiology of adolescent alcohol and drug abuse, a developmental perspective on the process of peer influence, and a theory of adolescent substance abuse. (Project Cork Institute)

8. Brown S. *Treating Adult Children of Alcoholics: A Developmental Perspective*. New York: John Wiley & Son, 1988. 333 pp.

This work offers a theoretical foundation for understanding and treating children of alcoholics. In three parts, following a literature review, it discusses 1) the alcoholic family, addressing the family environment and patterns of common interaction; 2) the impact of the parental alcoholism on individual development in terms of defenses, attachments an identity formation; and 3) the recovery process with attention to the core issues, the therapeutic tasks, and the process or stages in recovery. (Project Cork Institute)

9. Burnside MA; Baer PE; McLauglin RJ; Pokorney AD. Alcohol use by adolescents in disrupted families. *Alcoholism (NY)* 10(3):274-278, 1986. (16 refs)

Alcohol use increases among adults in response to marital disruption and divorce, but data that are available regarding adolescent alcohol use are inconsistent in the light of whether or not families are intact. To explore this question the study obtained measures of frequency and quantity of alcohol use from 2,595 junior and senior high school students, together with information about family intactness and parental alcohol use. Adolescents in single and stepparent families reported more alcohol use than adolescents from intact families, for frequency and quantity of use. This was the case for boys and for girls, as well as for junior high school and for senior high school students. Parents in non-intact families also were reported to be using significantly more alcohol than parents in intact families. Adolescent alcohol use was significantly correlated with parental alcohol use. After adjusting adolescent alcohol use for parental use as a covariate, the finding of greater alcohol use by adolescents in non-intact families remained. (Project Cork Institute)

10. Cermak TL. *Diagnosing and Treating Co-Dependence: A guide for professionals who work with chemical dependents, their spouses and children*. Minneapolis MN: Johnson Institute Books, 1986. 112 pp.

The author, a clinician early involved in the treatment of those living with an alcoholic spouse or parent, describes these dysfunctions as a syndrome which he terms "co-dependency" and conceptualizes as a disease entity consistent with DSM III diagnostic criteria. Using a DSM III-like schema, criteria for diagnosis of codependency are presented and treatment approaches described. (Project Cork Institute)

11. *Corrigan EM. Gender differences in alcohol and other drug use. *Addictive Behaviors* 10(3):313-317, 1985. (21 refs)
Data from the Drug Abuse Warning Network (DAWN) on drug use that results in emergency room visits shows that women have higher rates of using drugs alone or in combination, and the same incidence as males of alcohol-in-combination with other drugs. Thus, in relation to their proportion of the drinking population, women are overly represented in emergency room visits. The author discusses the physiological basis of drug-drug and alcohol-and-other-drug combinations, the different effects for males and females, and women's greater vulnerability to overdoses at lower levels of consumption. With many overdoses reported as accidental, it is suggested that warning labels and public education programs are warranted. (Project Cork Institute)

12. Dembo R; Schmeidler J; *Burgos W; Taylor R. Environmental setting and early drug involvement among inner-city junior high school youths. *Int J Addict* 20(8):1239-1255, 1985. (36 refs)
This study explores the drug use of a sample of inner-city junior high school youths by examining a hypothesized, interactive relationship between perceived toughness/drug use in their neighborhood and the youths' demographic, neighborhood orientation/involvement, and drug use context factors in regard to their involvement with drugs. The results dramatically showed that the youths' views of their environmental setting operate as a conditioning factor in understanding the correlates of their drug involvement. In supporting the hypothesis, prosocial correlates of drug use are stressed in settings characterized by high toughness/drug use settings. Our findings urge that serious consideration be given to examining social contextual effects on drug taking as a means to understanding this behavior among different sociocultural groups. (Authors' Abstract)

13. *Googins B; *Casey J. Dynamics of alcoholism in working families. *Alcohol Treat Q* 4(3):47-66, 1987. (39 refs)
While the family is often described as significantly affected by alcoholism, the authors note the relative lack of systematic research on the family and that myths are often presented as fact. This article reports the preliminary findings of an exploratory study of couples, drawn from those in which the husband was treated in an Employee Assistance Program. In some couples, both partners were in the labor force and in others the wife was not employed outside the home. The findings discussed center upon sources of support for wives of alcoholics, both in and outside of the family, and the impact of being employed. (Project Cork Institute)

14. Graham K; Romaniec J. Case-finding vs. right to privacy: A general dilemma emerging from a study of the elderly. *Drug Issues* 16(3):391-395, 1986. (12 refs)
A study examining how outreach agencies respond to addictions problems among the elderly uncovered a general dilemma for potential casefinders; namely, the conflict between the worker's concern about the client's substance use and the client's right to privacy. This article describes how the agencies surveyed were resolving the issue and offers some suggestions as to how the general dilemma can be addressed. (Authors' Abstract)

15. Johnston LD; O'Malley PM; et al. *National Trends in Drug Use and Related Factors*

Among High School Students and Young Adults, 1975-1987. Rockville MD: National Institute on Drug Abuse, 1988.
This work is based upon survey research funded by the National Institute on Drug Abuse (NIDA) and conducted annually since 1975 by the University of Michigan's Institute for Social Research. It is frequently termed the "High School Senior Survey." These surveys are periodically published as detailed volumes by the NIDA. (Project Cork Institute)

16. Jurich AP; Polson CP; Jurich JA; Bates RA. Family factors in the lives of drug users and abusers. *Adoles* 20(77):143-159, 1985. (85 refs)
A review of the literature suggested nine family factors which had an impact upon drug use: parental absence, discipline, scapegoating, hypocritical morality, parent-child communication gap, parental divorce, mother-father conflicts, family breakup, and the use of "psychological crutches" to cope with stress. [note: "Psychological crutches" are defined as means of coping with stress that relieve personal pain but sacrifice long-term coping and as behaviors which allow exoneration for responsibility for a situation and relieve the pressure created by a nonresponse.] In addition, data were collected on the closest family member to the drug-taking subject, the subject's perception of the most powerful family member, the family member who uses "psychological crutches," and situations where the most powerful member of the family used "psychological crutches." A paired analysis between drug users and drug abusers yielded significant differences on the use of two "psychological crutches" to cope with stressful situations: drugs and denial. Drug users were less likely to come from families where there was a communications gap and either laissez faire or authoritarian discipline. Drug abusers came from families where there was a communication gap and either laissez faire or authoritarian discipline. Drug abusers also came from families where the person whom they defined as most powerful tended to use "psychological crutches" to cope with stress. (Authors' Abstract)

17. Kandel DB; Logan JA. Patterns of drug use from adolescence to young adulthood: Periods of risk for initiation, continued use and discontinuation. *Am J Pub Health* 74:660-666, 1984. (11 refs)
Patterns of initiation, continued use, and decline in drug use are described on the basis of detailed drug histories in a longitudinal cohort representative of former New York State adolescents. In this cohort, the period of major risk for initiation to cigarettes, alcohol, and marijuana is completed for the most part by age twenty, and to illicit drugs other than cocaine by age twenty-one. Those who have not experimented with any of these substances by that age are unlikely to do so thereafter. Initiation into prescribed psychoactive drugs occurs at a later age than for the licit and illicit drugs and continues through the age period covered by the survey. A potential maturational trend in marijuana use in this cohort is apparent with a decline beginning approximately at age 22.5 for most usage patterns. The periods of highest marijuana and alcohol usage decline beginning at ages 20-21 and contrast sharply with cigarettes which exhibit climbing rates of highest use through the end of the surveillance period (age 25). Overall patterns are similar for men and women, with men initiating all drugs at higher rates than women, except for prescribed psychoactives. (Author Abstract)

18. Kaufman E, ed. *Power to Change: Family Case Studies in the Treatment of Alcoholism*. New York: Gardner Press, Inc., 1984. 316 pp.
This work contains 17 presentations by experienced family therapists utilizing different clinical perspectives in eleven full length case studies of alcoholics and their families. The methodologies described include structural, strategic, behavioral, multiple family groups, and systems techniques. (Project Cork Institute)

19. Kaufmann E; *Kaufmann PN. *Family Therapy of Drug and Alcohol Abuse*. New

York: Gardner Press, Inc, 1979. 276 pp.
This edited volume is a primer for those interested in family treatment approaches to alcohol and other drug abuse. It covers issues of evaluation, diagnosis, and intervention. There are numerous clinical vignettes and an extensive bibliography. (Project Cork Insutute)

20. Lewis DC; *Williams CN, eds. *Providing Care for Children of Alcoholics: Clinical and Research Perspectives*. Pompano Beach FL: Health Communications, Inc., 1986. 111 pp.
This edited work, assembled from a conference conducted at the Brown University Center for Alcohol Studies, provides an excellent overview to the research findings and clinical approaches for the range of issues that are subsumed under the rubric children of alcoholics. The chapters, based on presentations by regional and national experts, address social and cultural perspectives, the fetal alcohol syndrome, familial patterns of alcoholism, clinical characteristics and treatment approaches, the connection between alcoholism, family disruption and maltreatment; and policy considerations. (Project Cork Institute)

21. Lorion R. *Assessing and Screening High Risk Youth*. Rockville MD: Office for Substance Abuse Prevention. In press.
This monograph focuses on techniques for selecting appropriate recipients of intervention to prevent alcohol and drug abuse among the nation's youth. (Publisher's Abstract)

22. MacDonald DI; Blume SB. Children of alcoholics. *Am J Dis Child* 140:750-754, 1986. (42 refs)
One of eight American children is the child of a parent who has a past or present drinking problem. Children of alcoholic parents are at great risk. They are significantly more likely to develop addiction problems and a variety of mental health disorders. They live in homes with high levels of stress. Poor communications, permissiveness, undersocialization, neglect, and violence are common and can be truly devastating. Because of the stigma and denial associated with chemical dependency, these children often suffer in silence, unidentified and unassisted. (Authors' Abstract)

23. McDermott D. The relationship of parental drug use and parents' attitude concerning adolescent drug use. *Adoles* 19(73):89-97, 1984. (16 refs)
The purpose of the study was to examine the relationship of two variables, parental drug use and parental attitude toward adolescent drug use, both as perceived by the adolescent respondent to his or her own use or nonuse of drugs. A sample of 106 drug-using and 96 nondrug-using adolescents was obtained. In addition to confirming that adolescents who use drugs are significantly more likely to have one or more parents who use drugs ($p=.0001$), the study showed, more importantly, that adolescents who perceive their parents as having permissive views about drug use are significantly more likely to use drugs than those who perceive their parents as holding nonpermissive views ($p=.0001$). Furthermore, when parental drug use is held constant, these differences remain significant ($p=.05$ and $p=.0001$), indicating that parental attitude, as perceived by the young person, is as important, or more so, than actual parental behavior in determining adolescent drug use. (Author Abstract)

24. Muldoon J; Crowley J. *One Step Ahead: Early-Intervention Strategies for Adolescent Drug Problems*. Minneapolis MN: Community Intervention, 1986. 179 pp.
This handbook on prevention and early intervention in adolescent substance abuse, while directed primarily to the schools as the site for programs, is nonetheless an excellent primer for anyone active in community-based programs for adolescents. Beyond presenting the diverse elements of a comprehensive program, and the rationale for school-

based initiatives, it sets forth a step-wise model for program implementation and program assessment. The handbook discusses the conflicts that may be encountered and the conceptual issues that must be addressed, such as the role and involvement of parents, and differing perceptions and definitions on issues such as what constitutes "use", "abuse", and "experimentation." (Project Cork Institute)
Contact: Community Intervention, Inc., 529 South Seventh Street, Suite 570, Minneapolis MN, 55415. 800/328-0417.

25. National Institute on Alcohol Abuse and Alcoholism. *Alcohol and Birth Defects: The Fetal Alcohol Syndrome and Related Disorders*. Rockville MD: NIAAA, 1987. 56 pp.
This booklet provides a thorough review of the fetal alcohol syndrome (FAS) and related disorders. The material covered includes a historical review of the phenomenon, diagnostic criteria, frequency of occurrence, the relationship to different levels of maternal alcohol consumption, factors influencing susceptibility to FAS and FAE (Fetal Alcohol Effects), mechanism of fetal alcohol damage, and a review of animal studies. There is an extensive bibliography, with 123 citations provided. (ADM)87-1531 (Project Cork Institute)

26. National Institute on Alcohol Abuse and Alcoholism. *A Growing Concern: How to provide services for children from alcoholic families*. Rockville MD: NIAAA, 1985. 52 pp. (102 refs.)
This monograph summarizes the dimensions and nature of problems of children of alcoholics, approaches to providing care and the caregivers, organizational issues in respect to both the nature of agencies involved and the types of programs, and the role of cultural factors. Appendices include descriptions of programs, both school-based and agency based, special programs for ethnic groups, and an annotated reading list. (ADM)85-1257. (Project Cork Institute)

27. National Institute on Alcohol Abuse and Alcoholism. *Program Strategies for Preventing Fetal Alcohol Syndrome and Alcohol-Related Birth Defects*. Rockville MD: NIAAA, 1987. 77 pp.
This monograph was prepared by National Institute on Alcohol Abuse and Alcoholism (NIAAA) in cooperation with seven national professional associations, federal agencies, and private foundations. It is organized into three sections. The first offers an excellent summary of the nature and dimensions of the problem, in terms of prevalence, economic ramifications, community-based approaches and barriers to action. The second section discusses a range of programs from professional eduction, public education, client services, referral and support services, and school programs. The section on implementation, in a step-wise fashion, focuses upon the core tasks. Eight appendices are included with organizations resources, approaches with special populations, and materials for use in educational efforts. (ADM)87-1482. (Project Cork Institute)

28. National Institute on Alcohol Abuse and Alcoholism. *Women and Alcohol: Health-Related Issues, Research Monograph 16*. Rockville MD: NIAAA, 1986. 375 pp.
This volume reports the proceedings of a 1984 conference convened by the National Institute on Alcohol Abuse and Alcoholism (NIAAA), and co-sponsored by the School of Social Work, University of Washington, to examine the progress made since a conference conducted six years previous that had established priorities for the study of alcohol- and drug-related problems among women. The volume contains a "state of the art" review by national experts on the following topics: epidemiological research on women's drinking, 1978-'84; changes in women's drinking patterns during the past century; psychosocial issues related to women and alcoholism; treatment considerations; special populations

and cross-cultural variations in alcohol use and alcohol problems. (ADM)86-1139. (Project Cork Institute)

29. Office of the Inspector General. *Drug Utilization Review*. Washington DC: Department of Health & Human Services, 1989. 64 pp. (95 refs)
This report, mandated by the Medicare Catastrophic Coverage Act of 1988, reviews and makes recommendations to the U.S Department of Health and Human Services on Medicare Drug Utilization. Following an Executive Summary chapters address the four major findings, i.e. Mismedication among Older Americans, Weaknesses in the Drug Therapy Delivery System, Results of State Surveys, and other Drug Utilization Review Interventions. The Review also includes recommendations and comments upon the report by federal offices, national professional groups and associations and the Agency's response to these comments. Among the significant findings are that older Americans over age 60, though comprising only 17% of the population, account for 39% of all hospital admissions, and 51% of all deaths from drug reactions. For this group mismedication is *the* significant drug use problem. (Project Cork Institute)

30. *Pilat JM; Jones JW. Identification of children of alcoholics: Two empirical studies. *Alcohol Health Res World* 9(2):26-36, 1985. (38 refs)
This paper presents the C.A.S.T. (Children of Alcoholics Screening Test): a thirty item yes or no questionnaire, and summarizes the validation and reliability studies conducted. The authors then describe its use in two settings. The first identifying children of alcoholics in a classroom setting (10th, 11th, and 12th grade students); by the C.A.S.T. 27% were children of alcoholics. The second study used the C.A.S.T. to identify children of alcoholics among those enrolled in a course on Alcoholism and Family Dynamics. The students consisted of experienced professional clinicians, social work and family therapy students, other helping professionals. The C.A.S.T. identified 28.4 % of the experienced therapists, 25.5% of the students, and 46.2% of other helping professionals as children of alcoholics. (Project Cork Institute)

31. Rahdert ER; Grabowski J, eds. *Adolescent Drug Abuse: Analyses of Treatment Research, NIDA Research Monograph 77*. Rockville MD: National Institute on Drug Abuse, 1988. 139 pp.
This monograph was assembled from presentations from a technical review conducted by the National Institute on Drug Abuse (NIDA). The major topics include the assessment of adolescents for drug use problems, guidelines for client-treatment matching, working with families to reduce adolescent drug use, parental and peer influences in experimentation with drugs in early adolescence, concomitant psychiatric disorders, pharmacotherapy, and approaches to evaluating the quality of assessment. (ADM)88-1523. (Project Cork Institute)

32. Roman PM. *Women and Alcohol Use: A Review of the Research Literature*. Rockville MD: National Institute on Alcohol Abuse and Alcoholism, 1988. 64 pp. (214 refs)
This review of the research literature touches upon the the following topics: the social context of research in relation to women's issues, methodological problems, a review of epidemiology and social surveys, the biological features in relation to alcohol use, the psychological correlates of alcohol problems, and treatment. (ADM)88-1574. (Project Cork Institute)

33. Schaeffer D. *Choices and Consequences: What To Do When A Teenager Uses Alcohol/Drugs*. Minneapolis MN: Johnson Institute Books, 1987. 155 pp.
A basic primer on adolescent alcohol/drug use, the book is in two major sections. The first briefly reviews the developmental tasks of adolescence, the dynamics of adolescent

substance use, the progression from use to dependence (using the Johnson Institute framework), and cultural factors that provide an impetus for alcohol and drug use. The second section focuses upon intervention, offering a therapeutic rationale and practical tips helpful to the novice clinician and to family. This can be a useful tool for a professional's education of parents and family members dealing with an adolescent using alcohol and/or other drugs. (Project Cork Institute)

34. Schonberg SK, ed. *Substance Abuse: A Guide for Health Professionals*. Elk Grove Village IL: American Academy of Pediatrics/Pacific Institute for Research and Evaluation, 1988. 193 pp.

This book, directed to health care professionals who see adolescents, reviews the epidemiology and demographics of substance use, and describes the basic clinical approaches for both prevention and early identification of substance use problems. Chapters focus on the following topics: risk factors, a review of the major drug classes with references for further reading, the role of the primary care practitioner, interview and laboratory screening, referral techniques, prevention programs for the individual and for the community, and ethical and legal questions. (Project Cork Institute)

35. Seligman P. A brief family intervention with an adolescent referred for drug taking. *J Adolesc* 9(3):231-242, 1986. (6 refs)

This paper is a description of three family sessions with parents and their 19 and 17 year old sons. Their physician had referred the older son to the Family Institute, Cardiff as an "urgent" case saying that the son was taking LSD and cannabis and spending periods of time away from home. The article argues in favor of a "non-pathological" approach to some adolescents who are on the brink of receiving serious psychiatric labels. (Author Abstract)

36. Werner EE. Resilient offspring of alcoholics: A longitudinal study from birth to age 18. *J Stud Alcohol* 47(1):34-40, 1986. (19 refs)

This study focuses on child characteristics and on the qualities of the caregiving environment that differentiated between offspring of alcoholics who did and those who did not develop serious coping problems by age 18. The 49 subjects (22 male) are members of a multi-racial cohort of 698 children born in 1955 on the island of Kauai, Hawaii, who were followed at ages 1, 2, 10, 18. In this group, males and the offspring of alcoholic mothers had higher rates of psychosocial problems in childhood and adolescence than females and the offspring of alcoholic fathers. Children of alcoholics who developed no serious coping problems by age 18 differed from those who did in characteristics of temperament, communication skills, self-concept and locus of control. They had also experienced fewer stressful life events disrupting their family unit in the first two years of life. Results of the study support a transactional model of human development and demonstrate bidirectionality of child-giver effects. (Author Abstract)

Note: There is concern among both social work clinicians and professionals in the alcohol field that the dysfunctions associated with being a child of an alcoholic are being over-diagnosed and too often are ascribed on the basis of family history rather than based upon clinical evaluation. Another trend of concern is the tendency to generalize from the body of work on children of alcoholics, much based upon lay-based efforts, to the larger field of children of dysfunctional families. This study provides an invaluable context for any consideration of the effects of alcohol problems upon children, and the study from which it was derived (Werner EE; Smith RS. *Vulnerable but Invincible: A Longitudinal Study of Resilient Children and Youth*. New York: McGraw-Hill Book Co., 1982.), similarly offers a context for consideration of the impact of dysfunctional families upon child development. (Editor)

37. Werner EE; Smith RS. *Vulnerable but Invincible: A Longitudinal Study of Resilient Children and Youth*. New York: McGraw-Hill Book Co., 1982.

This volume reports the findings of a cohort from the Kauai Longitudinal Study, a longitudinal prospective study of multi-racial children, who were followed from the point of their mothers' pregnancy to adulthood. The cohort in this study were those who, though exposed to multiple stressors in early childhood, at age 18 did not exhibit significant life adjustment problems. The report identifies the factors within the child and the environment that contributed to their resiliency, i.e. their ability to cope with stress.The research includes both males and females. (Project Cork Institute)
Note: This book reports the total study from which the findings were drawn for the report on children of alcoholics, see Werner EE. Resilient offspring of alcoholics: A longitudinal study from birth to age 18. *J Alcohol Studies*, 47(1):34-40, 1986. (Editor)

38. Wood BL. *Children of Alcoholics: The Struggle for Self and Intimacy in Adult Life*. New York: New York University Press, 1987. 166 pp.
In a field that primarily addresses adult children of alcoholics descriptively, this work provides a theoretical perspective to underpin clinical practice with children of alcoholics. The book reviews the writings of major contributors to the work on adult children, draws upon the author's clinical practice, and integrates this with the theoretical perspectives provided by object relations theorists and self psychology. The author draws upon the discussions of problems with identity, intimacy, and self esteem, characteristically seen in adult children of alcoholics. (Project Cork Institute)

Prevention

1. Ames G; Janes C. Heavy and problem drinking in an American blue collar population: Implications for prevention. *Soc Sci Med* 25(8):949-960, 1987. (19 refs)
This paper presents the findings of a prevention-oriented research project designed to identify the familial and socio-environmental precursors of heavy drinking in a blue-collar population. This study examines alcohol use and drinking behavior in relation to both the family as a unit and the sociocultural context in which it is embedded. It reports on cultural, workplace, and community environments that are related to heavy or moderate drinking in the subject population. The sample consists of thirty families, fifteen where the father is a heavy drinker and fifteen where he is a moderate drinker. Suggestions for the primary prevention of alcohol problems in the context of the workplace and community are presented. (Project Cork Institute)

2. Bell CS; *Battjes R. *Prevention Research: Deterring Drug Abuse Among Children and Adolescents, NIDA Research Monograph 63*. Rockville MD: National Institute on Drug Abuse, 1985. 235 pp.
This volume includes ten presentations from a National Institute on Drug Abuse (NIDA) sponsored conference to address the issues of prevention and the promises and limitations of current prevention approaches. The topics covered include an overview of drug abuse prevention research, major conceptual approaches to primary prevention, social and personal skills training, and a critical review of smoking prevention programs as a model for general drug abuse prevention, plus a discussion of future research directions. (ADM)87-1334. (Project Cork Institute)

3. *DeMarsh J; *Kumpfer K. Family-oriented interventions for the prevention of chemical dependency in children and adolescents. *J Child Contemp Soc* 18(1-2):117-151, 1985. (111 refs)
Researchers and clinicians are beginning to recognize the valuable resource that parents and families are for increasing the effectiveness of substance abuse prevention programs

for youth and adolescents. To date, however, most prevention interventions have been developed for use in community or school-based programs. There is a growing number of family-oriented interventions which have been developed specifically as substance abuse prevention programs, or may be easily adapted for use by prevention specialists. This article will review these family-oriented interventions and discuss outcome effectiveness data when available. (Authors' Abstract)

4. Gardner S. *Social Policy and Substance Abuse Prevention*. Rockville MD: Office for Substance Abuse Prevention. In press.
This monograph concerns environmental techniques for the prevention of alcohol and drug problems. It includes issues such as the impact of societal attitudes on substance abuse, and the impact of cigarettes and alcoholic beverage advertising on use. (Publisher's Abstract)

5. Gerstein DR. *Toward the Prevention of Alcohol Problems: Government, Business, and Community Action*. Washington DC: National Academy Press, 1984. 174 pp.
This volume summarizes a 1983 conference conducted by a Panel of the National Research Council at the bequest of the National Institute on Alcohol Abuse and Alcoholism (NIAAA) to follow-up on a report, undertaken by the Council to address the range of public policy initiatives that might be implemented to prevent alcohol problems and to make policy recommendations. (Gerstein DR; Moore MH. *Alcohol and Public Policy: Beyond the Shadow of Prohibition*. Washington DC: National Academy Press. 1981.) The follow-up conference was held to foster public discussion of the report and to reflect upon prevention efforts that had been initiated at the community level via public policy initiatives. This volume, following a conceptual introduction to the topic of public policy approaches, examines the following areas: taxation and spending, involvement of the business sector, the role of the media, youth and drunk driving, and altering community norms to reduce alcohol problems. (Project Cork Institute)

6. Glynn TJ; *Leukefeld CG; Ludford JP, eds. *Preventing Adolescent Drug Abuse: Intervention Strategies, NIDA Research Monograph 47*. Rockville MD: National Institute on Drug Abuse, 1983. 261 pp.
This monograph describes the state of the art in respect to prevention of drug abuse, drawing in part upon the considerable research and programmatic attention to prevention efforts around cigarette use among adolescents, and major community-based prevention efforts in heart disease. The chapters, authored by researchers in the prevention field, provide a critical review of the major approaches to drug prevention, i.e. health education, social competency and skills development, values development, family-centered efforts, and drug education. The volume also includes discussion of the empirical foundation for family-based efforts, the role of the media, and implications for drug prevention drawn from other major health promotion and risk reduction efforts. (ADM)83-1280. (Project Cork Institute)

7. Goodstadt M, ed. *Demonstration Programs for Youth at Risk of Alcohol and Other Drug Abuse: Program Summaries*. Rockville MD: Office for Substance Abuse Prevention. In press.
This monograph summarizes the status of the 130 "High Risk Youth Demonstration Grants" funded by the Office for Substance Abuse Prevention in fiscal year 1987. (Publisher's Abstract)

8. Grady K; Gersick K; Boratynski M. Preparing parents for teenagers: A step in the prevention of adolescent substance abuse. *Fam Relation* 34(4):541-549, 1985. (14 refs)

"Preparing Parents for Teenagers" is a six session intervention program for parents which is responsive to the changing developmental role of parents of young adolescents. This article presents an overview of the intervention program and the results of the research project evaluating the effectiveness of the program. Parent participants in the course, when compared with delayed treatment control group parents, showed an increased ability to use decision making facilitation skills in responding to typical child statements. These skills included the ability to respond empathically to preadolescents' concerns and the ability to help individuals consider alternatives and consequences. (Authors' Abstract)

9. Johnson C; Hansen W; Pentz M. Comprehensive community programs for drug abuse prevention. *J Child Contemp Soc* 18(1-2):181-199, 1985. (36 refs)

This article describes both a pilot and a larger research effort to implement and evaluate a comprehensive community-based approach to drug abuse prevention. Since heart disease is a side effect of youth and adult chemical abusers, models for community-based prevention in the heart disease prevention area are discussed as well as issues that are specific to the area of drug abuse prevention. Criteria for successful community drug abuse prevention programs are outlined that include the necessity for employing a step-wise multi-component approach involving school, media, parent, and community organization programs. Implications of the initial results of the pilot for future community prevention programs are also described. Entry, community support, and long-term community ownership of prevention are emphasized. (Authors' Abstract)

10. Jones CL; *Battjes RJ, eds. *Etiology of Drug Abuse: Implications for Prevention, NIDA Research Monograph 56*. Rockville MD: National Institute on Drug Abuse, 1985. 276 pp.

This monograph defines the "state of the art" in prevention research in respect to drug abuse, with the contributors being investigators of National Institute on Drug Abuse (NIDA) funded research grants. The work is divided into two major sections. The first is "Childhood and the Transition to Adolescence," which includes discussion of familial antecedents of adolescent drug use, from a developmental perspective; the development of health orientation among children and the implications for substance use prevention; predictors of adolescent substance abuse; and research strategies to identify developmental vulnerabilities for drug abuse. The second section, "Transition to Young Adulthood", addresses recent historical changes that may relate to issues of etiology and prevention; age of onset of drug use as a factor in subsequent problems; patterns of use of legal, non-legal, and medically prescribed psychotropic drugs during later adolescence; prevention of adolescent drug abuse drawing upon etiological, developmental, behavioral and environmental models; and discussion of the pressing research questions. (ADM)85-1335. (Project Cork Institute)

11. *Kumpfer K; Moskowitz J; Whiteside H; Klitzner M. Future issues and promising directions in the prevention of substance abuse among youth. *J Child Contemp Soc* 18(1-2):249-278, 1985. (77 refs)

This article first reviews environmental and public policy approaches to prevention. Next, it provides a scheme for conceptualizing the various approaches to prevention in relation to the Public Health Services prevention model—the Host/Agent/Environment Triad. The difficulty in prioritizing prevention approaches and six major areas of research needed before this can be accomplished are discussed. The article concludes with speculation about the future of prevention, based on possible positive and negative changes in society and drug use patterns, and finally, recommendations are made for the most promising approaches. (Authors' Abstract)

12. Legal Action Center. *Legal Issues in Prevention*. Rockville MD: Office for Substance

Abuse Prevention. In press.
The purpose of this paper is to touch on legal issues of concern to alcohol and drug abuse programs working with youth. Topics will include: confidentiality, right to treatment, parental consent, the screening of prospective employees and volunteers (child abuse prevention), and quality of care. (Publisher's Abstract)

13. Marlatt GA; Gordon JR, eds. *Relapse Prevention*. New York: Guilford Press, 1985. 558 pp.
This work on relapse prevention addresses two important phenomena, i.e. the maintenance of changed behavior, and efforts to prevent any lapse from escalating into a return to the previous fully active addictive state. The work is in two parts. Part I addresses the rationale and specific approaches to relapse prevention, i.e. cognitive factors in relapse, situational factors prompting relapse, skill training interventions, and efforts to achieve modifications of lifestyle. The Second Part focuses upon the application of these approaches to alcohol problems, smoking, and weight control. (Project Cork Institute)

14. Moskowitz JM. The primary prevention of alcohol problems: A critical review of the literature. *J Stud Alcohol* 50(1):54-88, 1989. (240 refs)
The research evaluating the effects of programs and policies in reducing the incidence of alcohol problems is critically examined including: (1) policies affecting the physical, economic, and social availability of alcohol (e.g. minimum legal age, price and advertising of alcohol), (2) formal social controls on alcohol-related behavior (e.g. drinking driving laws), (3) primary prevention programs (e.g. school based alcohol education), and (4) environmental safety measures (e.g. automobile airbags). The research generally supports the efficacy of three alcohol-specific policies: raising the minimum legal drinking age to 21, increasing alcohol taxes and increasing the enforcement of drinking-driving laws. Also, research suggests that various environmental safety measures reduce the incidence of alcohol-related trauma. In contrast, little evidence currently exists to support the efficacy of primary prevention programs. However, a systems perspective of prevention suggests that prevention programs may become more efficacious after widespread adoption of prevention policies that lead to shifts in social norms regarding use of beverage alcohol. (Author Abstract)

15. Office for Substance Abuse Prevention. *A Practical Guide for High-Risk Youth Prevention Programming*. Rockville MD: OSAP. In press.
This book is intended as a resource package of practical information for those setting up, modifying, or expanding a prevention program for high-risk youth. Essentially, this guide will translate the findings of the OSAP grant program into practical, helpful guidelines for alcohol/other drug prevention program planners and managers. As a cost-saving measure, reprints will be made of the separate chapters for distribution to those concerned only with individual topics. The sections will be devoted to the following topics: screening and assessing high-risk children and youth for appropriate admission to the program; recruiting high-risk children and youth and retaining them in the program; recognizing and handling legal liability issues for the prevention program; incorporating an AIDS education/prevention component into the program; evaluating the high-risk youth program; managing the program; and implementing social policy. (Publisher's Abstract)

16. Office for Substance Abuse Prevention. *Proceedings of the Second National Learning Community Conference on the Prevention of Alcohol and Other Drug Use Among High-Risk Youth*. Rockville MD: OSAP. In press.
This publication will contain the conference proceedings, sponsored by OSAP, held

December 11-14, 1988. (Publisher's Abstract)

17. Olson S; Gerstein DR. *Alcohol in America: Taking Action to Prevent Abuse*. Washington D.C: National Academy Press, 1985. 125 pp.
This work provides an update of the major themes as well as a synopsis of two earlier published reports based on conferences organized by the National Research Council at the behest of the National Institute on Alcohol Abuse and Alcoholism (NIAAA) to address actions that can be taken to prevent alcohol abuse. This work focuses upon the impact of price and availability of alcohol, the role of the mass media, drinking by young people, and possible steps to reduce environmental risk. The volume also contains sources of further information on prevention, an annotated reading list, and organizations engaged in public education and advocacy of policies to promote prevention efforts. (Project Cork Institute)

18. Pentz MA; Dwyer JH; MacKinnon DP; et al. A multicommunity trial for primary prevention of adolescent drug abuse: Effects on drug use prevalence. *JAMA* 261(22):3259-3266, 1989. (36 refs)
The entire early adolescent population of the fifteen communities that constitute the Kansas City (Kansas and Missouri) metropolitan area has participated in a community-based program for prevention of drug abuse since September 1984. The Kansas City area is the first of two major metropolitan sites being evaluated in the Midwestern Prevention Project, a longitudinal trial for primary prevention of cigarette, alcohol, and marijuana use in adolescents. The project includes mass media programming, a school-based educational program for youths, components that are introduced sequentially into communities during a 6-year period. Effects of the program are determined through annual assessments of adolescent drug use in schools that are assigned to immediate intervention or delayed intervention control conditions. In the first two years of the project, 22,500 sixth- and seventh-grade adolescents received the school-based educational program component, with parental involvement in homework and mass media coverage. Analyses of 42 schools indicate that the prevalence rates of use of all three drugs are significantly lower at 1-year follow-up in the intervention condition relative to the delayed intervention condition, with or without controlling for race, grade, socioeconomic status, and urbanicity (17% vs 24% for cigarette smoking, 11% vs 16% for alcohol use, and 7% vs 10% for marijuana use in the last month), and the net increase in drug use prevalence among intervention schools is half that of delayed intervention schools. (Authors' Abstract)

19. Perry CL; Jessor R. The concept of health promotion and the prevention of adolescent drug abuse. *Health Educ Q* 12:169-184, 1985. (39 refs)
A three-dimensional conceptual model for health promotion interventions to prevent adolescent drug abuse is elaborated. The model is based on an analysis of the concept of health into four domains—physical, psychological, social, and personal; an analysis of intervention approaches to change behavior into two major strategies—introducing/strengthening health enhancing behavior, and weakening/eliminating health-compromising behavior; and an analysis of the foci of interventions into three levels—environmental, personality, and behavior. Components of a specific health promotion program, the Minnesota Heart Health Program, that are designed to prevent adolescent drug abuse are described. These include health behavior campaigns, educational interventions, and community organization. The theoretical content of the components is shown to be linked logically to the health promotion model. (Authors' Abstract)

20. Resnik H. *Attracting and Retaining High Risk Youth*. Rockville MD: Office for Substance Abuse Prevention. In Press.

Simply getting young people and their parents to become involved in a substance abuse prevention program is a challenge. Once they get involved, keeping them involved is just as difficult. This paper will assist programmers in such efforts. (Publisher's Abstract)

21. Resnik H. *In the Absence of a Cure: AIDS and Substance Abuse Prevention*. Rockville MD: Office for Substance Abuse Prevention. In press.
The main purpose of this paper is to provide constructive suggestions based on available evidence and point the way for future efforts to prevent HIV transmission among youth. (Publisher's Abstract)

22. Schaps E; Battistich V. *Prevention in Educational Settings*. Rockville MD: Office for Substance Abuse Prevention. In press.
Summarizes what has been learned about school-based prevention programming and makes recommendations for improving such programming focusing on pre-school and elementary school based programs. (Publisher's Abstract)

23. *Schinke SP; Bebel M; Orlandi M; Botvin G. Prevention strategies for vulnerable pupils: School social work practices to prevent substance abuse. *Urban Educ* 22(4): 510-519, 1988. (13 refs)
This article describes how school social workers can successfully execute preventive interventions with vulnerable pupils, drawing from original research and data on two substance abuse problems that are recalcitrant issues for most American schools: tobacco use and drug use. (Project Cork Institute)

24. *Schinke SP; *Shilling RF; Palleja J; Zayas L H. Prevention research among ethnic-racial minority group adolescents. *Behav Ther* 10(7):151-155, 1987. (51 refs)
In this article, Steven Schinke and his colleagues provide an overview of their behavioral social work efforts to prevent health problems among racial-ethnic minority group adolescents. Although behavior therapy as a whole has devoted more attention to helping the poor, severely disabled, oppressed and minorities than have other practice theories, the severity of the problems experienced by these populations should be an incentive for more efforts in this direction. No other approach besides behavior therapy is in possession of an effective science of human behavior change, and since the majority of the problems treated by social workers and other human service professionals are behaviorally driven, behavior therapy is the most promising approach in our effort at serving these neglected populations. (Publisher's Abstract)

25. Steinberg L. *Adolescent Transitions and Substance Abuse Prevention*. Rockville MD: Office for Substance Abuse Prevention. In press.
This paper examines substance abuse in light of the transitional nature of the adolescent period. It summarizes current thinking about adolescent development, with particular emphasis on the transitional aspects of adolescence, and early adolescence in particular, discusses the specific implications of research for understanding patterns of adolescent substance abuse, and examines the specific implications of the literature for the design of substance abuse prevention programs for this population. (Publisher's Abstract)

26. Swisher J; Marcus C. *Prevention Makes a Difference*. Rockville MD: Office for Substance Abuse Prevention. In press.
This will be a three-section monograph that will highlight the evaluation work by OSAP Prevention Demonstration programs. All of the brief chapters within each section will be written by OSAP grantees and reviewed by an independent panel of prevention experts. Section One of the monograph will focus on the results of outcome evaluations that have been conducted by individual OSAP grant programs. Papers will be reviewed by an

expert panel for final selection and inclusion in the section titled "Prevention Makes a Difference: Outcome Studies of High-Risk Demonstration Innovations." Section Two will focus on developing a profile of high-risk youth being served by the OSAP grantees. Sociodemographic cohort profiles, case histories, and brief ethnographic studies will be included in the section titled "Profiles of High-Risk Youth: Characteristics of Youth in OSAP Demonstration Programs." Section Three, "Overcoming Barriers and Hurdles: Practical Advice for Getting Started" will contain practical advice for prevention program staff and policy makers who could benefit from the experience of applied prevention program managers. (Publisher's Abstract)

27. U.S. Department of State, Bureau of International Narcotics Matters. *Building Public Awareness: A Handbook for Drug Awareness Campaigns*. Washington DC: U.S. Department of State, 1988. 160 pp.

This Handbook, produced by the Department of State was prepared to assist in public information campaigns to increase the awareness of the impact of drugs on society, viewed as a necessary antecedent for other prevention programming. It is organized into three sections. Part I, a planning guide, provides a rational, theoretical approach to communications, needs assessments, and targets and strategies. Part II focuses upon implementation, the creation of materials, pretesting, working with the media, working with organizations, and evaluation. The Appendices, Part III, include sample materials, a glossary and three well selected articles, each with an extensive bibliography on the role of media, the use and effects of public service announcements, and a critical review of mass media and smoking cessation. (Project Cork Institute)

28. Wallack L. Mass media, youth and the prevention of substance abuse: Towards an integrated approach. *J Child Contemp Soc* 18(1-2):153-180, 1985. (41 refs)

Drug use rates among adolescents have declined in recent years but remain at high levels. This trend offers an excellent opportunity for reinforcing prevention efforts that focus on the context and conditions of use. Such an endeavor requires significant rethinking of the prevention process itself. This paper presents a series of principles which foster an integrated approach to prevention, and places the role of mass communications in that framework. Television programming, advertising, and mass media campaigns can all be used in an effort to change the message environment in which individuals behave. (Author Abstract)

Special Populations

1. Brisbane L; *Womble M, eds. *Treatment of Black Alcoholics*. New York: Haworth Press, 1985. 270 pp.

This multi-authored work in 14 chapters, directed to clinicians in the alcoholism treatment field, speaks to the application and "translation" to black clients of the treatment approaches used with the majority cultural. The book discusses different treatment settings and modalities and how these can be optimally utilized with black clients, i.e. AA, inpatient rehabilitation, the evaluation process, employee assistance programs, and the emergency setting. It also focuses upon the special needs of sub-groups of Black Americans—women and the multiple addicted. There is special emphasis on orienting clinicians to black culture, the range of diversity found in the black community, and the approaches that are culturally compatible and utilize strengths of the black community and its institutions. (Project Cork Institute)

2. Caetano R. Patterns and Problems of Drinking among U.S.Hispanics. IN: Subcommittee on Chemical Dependency, *Report of the Secretary's Task Force on Black and Minority Health. Volume VII: Chemical Dependency and Diabetes.* Washington DC: Department of Health and Human Services, 1986. pp. 143-186. (86 refs.)

This paper was commissioned by the Subcommittee on Chemical Dependency as part of its charge to prepare a statement on the impact of alcohol and other drug use upon the health of blacks and minority group members. The paper is a state of the art review of the dimensions of alcohol use among U.S. Hispanics and its impact upon health. The text includes tables summarizing the data presented. (Project Cork Institute)

3. Comaz-Díaz L. Puerto Rican Alcoholic Women: Treatment Considerations. *Alcohol Subs Abuse Q* 3(1):47-57, 1986. (23 refs.)

Clinicians need to be aware of the proliferation of alcoholism among Hispanic women. The clinical treatment of five alcoholics in a group modality is presented. The conceptualization and implementation of the treatment was developed within a sociocultural framework. Implications for working with Puerto Rican alcoholic women are presented. (Author Abstract)

4. Committee on Health Care for Homeless People. *Homelessness, Health, and Human Needs*. Washington DC: National Academy Press, 1988. 242 pp.

This work reports the results of a study commissioned by the Department of Health and Human Services. A significant portion of all homeless individuals, except among homeless women and their families, are estimated to have a serious alcohol and/or drug problem often associated with other co-morbidity. This work is not primary addressed to alcohol and substance abuse but discusses the dimensions and demographic characteristics of the homeless population, the dynamics of homelessness, and health care needs of homeless people. For alcohol and substance abuse clinicians serving the homeless, it provides an excellent introduction to this client group. (Project Cork Institute)

5. Delgado M; Andrews-Rodriguez S. *Hispanic High-Risk Programs: OSAP Grant Studies*. Rockville MD: Office of Substance Abuse Prevention. In press.

This report will be one of two designed to share programmatic knowledge gained from the OSAP demonstrations about a particular high-risk ethnic group. Hispanics are over-represented among the victims of alcohol and other drug abuse, including drug-related deaths and homicide (Hispanics are 2.7 times more likely to be in treatment for a drug abuse problem than are whites, and their average age of admission at age 25 suggests early onset of use for heroin, cocaine, marijuana, PCP, and inhalants, usually in combination with alcohol). Close to 44 percent of U.S. Hispanics are under 21. A number of the OSAP grants are directed to Hispanic youth audiences, permitting the carrying out and evaluation of a variety of prevention/intervention strategies among high-risk Hispanic youth populations. Such specific programmatic materials pertaining to Hispanic audiences are virtually nonexistent and this book will represent an advance in state-of-the-art information. (Publisher's Abstract)

6. Fleming C. *Native American High-Risk Youth Programs: OSAP Grant Studies*. Rockville MD: Office for Substance Abuse Prevention. In press.

This report is designed to share programmatic knowledge gained from the OSAP demonstration grants for Native American young people (17 percent of the total program). Native American youth experience an extremely high rate of alcohol and other drug use. In 1985, 78 percent of Native American youth in 7th to 12th grade reported having tried alcohol, compared to 57 percent of non-Indian adolescents in the national Household Survey, was 21 percent higher for alcohol, 35 percent higher for marijuana, 16

percent higher for inhalants, and 14 percent higher for stimulants. In 1985, 45.4 percent of Indian adolescents were at risk of physical or emotional problems due to alcohol or other drug use. The OSAP grants provide a range of strategies and goals, activities, and preliminary findings. (Publisher's Abstract)

7. Gilbert MJ, ed. *Alcohol Consumption among Mexicans and Mexican Americans: a Binational Perspective*. Los Angeles CA: Regents of the University of California, 1988. 287 pp. (English and Spanish)

This monograph is a collection of papers presented at the U.S.-Mexico Conference on Alcohol Related Issues, held in 1987, and provides a review of the current information on patterns of alcohol use, problems related to use, cultural considerations, the approaches to prevention and treatment in persons of Mexican descent in Mexico and the United States. Papers in Spanish are accompanied by lengthy abstracts in English and similarly English papers are included in Spanish. (Project Cork Institute)

Contact: UCLA Spanish Speaking Mental Health Center, Room 25-26, 1000 Veteran Avenue, Los Angeles CA, 90024-1653.

8. Gilbert MJ; Cervantes R. Alcohol services for Mexican Americans: A review of utilization patterns, treatment considerations and prevention activities. *Hispanic J Behav Sci* 8(3):191-223, 1986. (70 refs)

There currently exists an information gap between researchers and providers of services aimed at the Mexican American alcoholic population. While epidemiologic-based information has surfaced, providing more detailed information on high-risk segments of the Mexican American population, currently little is known with respect to the forms of alcohol treatment most relevant and effective in alleviating abuse and dependency in this ethnic group. The intent of this review was to provide a bridge in information by synthesizing the available literature which addresses: (a) utilization patterns of alcohol-related services by Mexican Americans; (b) existing therapeutic approaches which take into account cultural factors, and; (c) existing approaches to alcohol abuse education and prevention for this population. Finally, recommendations for future alcohol service research aimed at the Mexican American population are suggested. (Authors' Abstract)

9. Harper FD. *The Black Family and Substance Abuse*. Detroit MI: The Detroit Urban League, 1986. 44 pp. (98 refs.)

This Report was prepared to identify the magnitude of the crisis for the urban black family resulting from substance abuse and to make recommendations to address it. The Report provides a brief historical overview, describes both alcohol and drug use by the family and youth, and for alcohol, its relationship to health problems and youth-family dynamics, and for drugs, use among youth, causes and predictors of use, and the connection between drug use and criminal behavior. The Report also discusses relevant theoretical constructs and conceptual models for viewing black alcohol and drug use. The recommendations of the Report focus upon both prevention and treatment of substance abuse, in relation to the major sectors of society, i.e. the educational system, employment and training needs, governmental responsibilities, community efforts, and the treatment community. The appendices include a 21 item annotated bibliography of "selected, major works on the black family." (Project Cork Institute)

10. Herd D. A review of drinking patterns and alcohol problems among U.S. Blacks. IN: Subcommittee on Chemical Dependency, *Report of the Secretary's Task Force on Black and Minority Health. Volume VII: Chemical Dependency and Diabetes*. Washington DC: Department of Health and Human Services, 1986. pp.77-140. (131 refs.)

This paper was commissioned by the Subcommittee on Chemical Dependency as part of

its charge to prepare a statement on the impact of alcohol and other drug use upon the health of blacks and minority group members. The paper is a state of the art review of the dimensions of alcohol use and the related problems. It is particularly useful in addressing differences related to demographic variables, and regional differences. In addition to an extensive bibliography there are appendices of statistical tables. (Project Cork Institute)

11.*Kinney J. *Native American Alcohol and Substance Use: An overview*. Hanover NH: Project Cork Institute, 1988. 52 pp.
This monograph, adapted from materials initially prepared to accompany a training program for professional staff of the Indian Health Service, includes an overview of the extent and nature of alcohol and other drug use problems among Native Americans (16 pp.) and appendices of resource materials (36 pp.), including a bibliography, an annotated list of audio-visual materials, an annotated directory of organizations targeted to Native Americans, and a directory of treatment programs serving Native Americans. (Project Cork Institute)

12. Lawson GW; Lawson AW. *Alcoholism and Substance Abuse in Special Populations*. Rockville MD: Aspen Publications, 1989. 370 pp.
This multi-authored volume in separate chapters addresses the following groups: women, adolescents, the elderly, gays and lesbians, the dually diagnosed (alcohol/substance abuse and a concomitant psychiatric disorder), the disabled, Blacks, Hispanics, Native Americans, the indigent, physicians, the professional athlete, and those in the military. For each there is a brief descriptive overview of the dimensions of alcohol and substance use problems, followed by a description of the significant social and cultural factors and their treatment implications. (Project Cork Institute)

13. Lex BW. Review of alcohol problems in ethnic minority groups. *J Consul and Clin Psychol* 55(3):293-300, 1987. (67 refs)
This article reviews recent research on alcohol use and alcohol problems among Black Americans, Hispanic Americans, and American Indians. Strengths and weaknesses of conventional research methods and lacunae in current information are examined. To date, no studies have systematically documented variations in drinking styles and factors that promote or maintain alcohol abuse. Each minority group is heterogeneous in its drinking patterns; drinking problems, and the psychological, medical and social consequences of alcohol abuse. Collectively, these factors have important implications for evaluating programs to treat minority persons. The author suggests that future research adopt multidisciplinary approaches to more fully characterize ethnopharmacological profiles of alcohol use and abuse among these ethnic minorities. (Author Abstract)

14. National Institute on Drug Abuse, Division of Epidemiology and Statistical Analysis. *Use of Selected Drugs Among Hispanics: Mexican-Americans, Puerto Ricans, and Cuban-Americans: Findings from the Hispanic Health and Nutrition Examination Survey*. Rockville MD: NIDA, 1987. 79 pp.
The Hispanic populations surveyed include Mexican-Americans, Cuban-Americans and Puerto Ricans. The report addresses the use of marijuana, cocaine, inhalants, and sedatives in terms of prevalence of use, lifetime frequency, frequency in the past 30 days, and lifetime use. While identical data is not available for each group, cross-cultural comparisons are made. There is a description of the research design and data collection methods, and the data analyzed in the report and its limitations. (Project Cork Institute)

15. Primm B. Drug Use Special Implications for Black America. In: Dewart J. ed. *State of Black America, 1987*. New York: National Urban League, Inc., 1987. pp. 145-159.

(40 refs)
This chapter summarizes the historical commentary on Afro-American drug use from the days of Slavery and Reconstruction, many of which are informed by racist views rather than historical data, and the legacy of these perceptions. It also discusses the current nature and extent of substance abuse problems in the black community and the limitations of the data. The focus is upon social structural factors, typically not discussed or only alluded to in discussions of minority drug use, that underlie problems of drug use in the Afro-American community. (Project Cork Institute)

16. *Ridgely SM; Goldman HH; Talbott JA. *Chronic Mentally Ill Young Adults with Substance Abuse Problems: A Review of Relevant Literature and Creation of a Research Agenda*. Baltimore MD: University of Maryland School of Medicine, 1986. 90 pp.
17. *Ridgely SM; Osher FC; Talbott JA. *Chronic Mentally Ill Young Adults with Substance Abuse Problems: Treatment and Training Issues*. Baltimore MD: University of Maryland School of Medicine, 1987. 38 pp.

These two reports are the product of a collaborative effort of the National Institute of Mental Health (NIMH) and the National Institute on Drug Abuse (NIDA) conducted by the Mental Health Policy Studies Group of the University of Maryland School of Medicine. These reports address the research, treatment and training required to serve the population who have a substance abuse problem and chronic mental illness, a population that too frequently is inadequately served by the mental health and substance abuse fields. The November 1986 report includes a 156 item bibliography. The October 1987 report addresses five core questions related to programming needs. Based upon site visits to eleven programs, individually summarized in the appendices, it describes the current programmatic state of the art. A bibliography of 55 citations is provided. (Project Cork Insutute)

18. *Schilling RF; *Schinke SP; *Nichols SE; et al. Developing strategies for AIDS prevention research with Black and Hispanic drug users. *Public Health Rep* 104(1):2-11, 1989. (102 refs)

More than eight out of ten intravenous drug users infected with human immunodeficiency virus (HIV) are Black or Hispanic. Recognizing that sociocultural factors affect HIV transmission, public health officials have called for interventions designed for ethnic-racial minority groups. Considered in this paper are the nature and extent of AIDS among ethnic-racial minorities and cultural aspects of drug use and sexual behavior related to HIV transmission. That drug users and their associates are practicing safer needle use is evident; that they are changing their sexual behavior is less so. Calling for rapid advances in knowledge and expanded efforts in intervention, Federal agencies have initiated numerous programs to support innovative research and demonstration projects in ethnic-racial minority communities. Needed are studies that (a) describe the phenomena of drug use and sexual behavior among ethnic-racial minority populations; (b) establish the efficacy of culturally specific AIDS prevention strategies in drug treatment and community settings, and (c) demonstrate new ways of recruiting, treating, and reducing relapse among drug users. (Author Abstract)

19. Spiegler D; Tate D; Aitken S, eds. *Alcohol Use Among U.S. Ethnic Minorities, Research Monograph No. 18*. Rockville MD: National Institute on Alcohol Abuse and Alcoholism, 1989. 470 pp.

This monograph assembles presentations from a meeting convened in 1985 by the National Institute on Alcohol Abuse and Alcoholism (NIAAA) on the Epidemiology of Alcohol Use and Abuse among Ethnic Minority Groups. The conference focused upon Black Americans, Hispanic Americans, Native Americans and Alaska Natives, and

Asian/Pacific Americans. The data presented is drawn from authors' surveys and/or ethnographic studies, as well as data collaboratively collected by the NIAAA and the National Center for Health Statistics. (ADM)89-1435. (Project Cork Institute)

20. Timmerman C, ed. *Alcohol Health and ResWorld: Alcohol and the Physically Impaired* 13(2):1-96 (entire issue), 1989.
This issue is devoted to alcohol problems among the physically impaired, with articles on alcohol abuse and/or treatment in relation to those with recent spinal cord injury, orthopedically impaired college students, those with arthritic disease, the blind, and the visually impaired children of alcoholics. There is also an article describing a model intervention program for those with physical impairments. (Project Cork Institute)

21. Towle LH; Harford TC, eds. *Cultural Influences and Drinking Patterns: A Focus on Hispanic and Japanese populations*. Rockville MD: National Institute on Alcohol Abuse and Alcoholism, 1988. 328 pp.
This monograph is the product of a multinational research effort, "WHO Project on Community Response to Alcohol-Related Problems", sponsored by the National Institute on Alcohol Abuse and Alcoholism (NIAAA). Following an Executive Summary the monograph has papers on five major topics: an overview of cross-cultural research: alcohol use and alcohol-related problems in the Far East, among the Japanese, Koreans and the Taiwanese, plus Japanese Americans; the flushing reaction; alcohol use and alcohol-related problems in three Hispanic populations, from Mexico, from Madrid Spain, and a comparison of those groups with Hispanic Americans; and in conclusion, the implications of such cross cultural study for both social policy and research. (ADM) 88-1563. (Project Cork Institute)

22. Subcommittee on Chemical Dependency, Chemical Dependency. IN: *Report of the Secretary's Task Force on Black and Minority Health. Volume VII: Chemical Dependency and Diabetes*. Washington DC: Department of Health and Human Services, 1986. 188 pp. (170 refs.)
This chapter is one part of a special task force report established by the Secretary of Health and Human Services in response to the findings reported in *Health, United States, 1983*, an annual report on the nation's health, that while health and longevity improved nationally, the same was not the case for black and ethnic minorities, for whom there is greater major illness, higher infant mortality, and a significantly lower life expectancy. This report on chemical dependency reviews alcohol and drug use and the related problems among blacks, Native Americans, Alaskan Natives, Hispanics, and Asian Americans/Pacific Islanders, and Native Hawaiians. It provides a statement of the current knowledge in respect to prevalence of use and problems, and related-health consequences. Appended to the Report are two papers commissioned by the Subcommittee, one on a review of drinking patterns and alcohol problems among U.S. Blacks, with numerous tables and charts, and the other describing the patterns and problems of drinking among U.S. Hispanics. (Project Cork Institute)

23. *Watts TD; *Wright R. Black Alcoholism. *J Alcohol Drug Educ* 33(2):76-80, 1988. (39 refs)
Adapted from the Introduction to their book, *Black Alcoholism: Toward a Comprehensive Understanding*" (Springfield IL: Charles C. Thomas, 1983), the brief piece notes the paucity of research and literature, credits the major investigators on topics related to Black alcoholism, and suggests a framework for approaching the topic, one that incorporates transcultural, socio-cultural, and ecological perspectives. (Project Cork Institute)

24. Weibel-Orlando J. Substance abuse among American Indian youth: A continuing

crisis. *J Drug Issues* Spring: 313-335, 1984. (73 refs)
The endemic quality of alcohol abuse among Native Americans is well documented. In the last decade, a growing body of research has also documented disproportionately high rates of alcohol as well as inhalant and other drug use among Native American youth. This article reviews the literature which specifically addresses this social and health problem. It is noted that beer drinking predominates and is disproportionately higher among Native American youth than among whites or other ethnic minority youth; group. that Native American youth also use inhalants and marijuana at disproportionately higher rates; however, their use of other types of street drugs parallels the national norm. Factors such as peer group encouragement, laissez-faire child-rearing practices, conflicts between cultural ideals and behavioral realities, parental and community attitudes about drug use, and the concomitant adult drug use models, all are viewed as contributing to a cultural matrix which either exacerbates or retards drug use. (Project Cork Institute)

25. Willer B; Vokes D. *Prevention of Chemical Dependency among Native American Families and Youth: An Annotated Bibliography and Review*. Buffalo NY: State University of New York at Buffalo, 1989. 32 pp.
The report includes a ten page summary of the literature and an 87 item annotated bibliography organized to compare Native American adults and adolescents to the general population in terms of substance use and abuse, treatment, prevention, and also compare mental health and fetal alcohol syndrome between the Native Americans and the general population. This report, the first step in a larger project to develop prevention initiatives for Native American groups in New York State, was sponsored by the New York State Task Force on Integrated Projects for Youth and Chemical Dependency. Within the State, of those who describe themselves as Native Americans, only one-quarter are served by the Indian Health Service (IHS); thus, both the State and local communities are required to devise programs to serve the majority of the state's Native American population. (Project Cork Institute)
Contact: Barry Willer, Ph.D., Director, Division of Community Psychiatry, New York State University at Buffalo, 2211 Main Street, Buffalo NY 14214. 716/831-2816.

26. Woodward J. *Signs of Drug Use: An introduction to drug and alcohol vocabulary in American Sign Language*. Silver Spring MD: TJ Publishers, Inc., 1980. 81 pp.
This book defines and illustrates the vocabulary for terms in American Sign Language (ASL) associated with alcohol and drug use, and the different classes of substances along with their effects. The Introduction, directed primarily to the individual unfamiliar with ASL, notes regional differences in vocabulary that should be anticipated, and also points out the dangers in approaching ASL as an analog of English rather than as a separate language. (Project Cork Institute)

27. *Wright R ; *Watts TD. Alcohol and Minority Youth. *J Drug Issues* 18(1):1-6, 1988. (15 refs)
Minority youth who use (or abuse) alcohol in American society deal with three realities: using "alcohol," being "minority," and being young "youth." All three dimensions are viewed by the larger society with mixed—sometimes hostile, sometimes fearful—reactions. With minority youth we see the disproportionate occurrence of rapid population growth, poverty, school dropouts, criminal justice system clients, and social welfare system clients. We cannot examine alcoholism among minority youth without seriously coming to grips with poverty, education, and life condition. More and better research and theoretical models are needed that help us to understand and confront this problem. (Authors' Abstract)

28. Ziebold T; Mongeon J, eds. *Gay and Sober: Directions for Counseling and Therapy*.

New York: Harrington Park Press, 1985. 285 pp.
This work represents an update of a special volume of the *Journal of Homosexuality* (7:4, 1982). It provides a theoretical perspective on the specific issues of alcohol use, alcoholism, and homosexuality, addresses treatment issues and clinical approaches, discusses prevention efforts, and social policy issues. (Project Cork Institute)

Classic Articles*

1812 Rush B. *An Inquiry into the Effects of Ardent Spirits Upon the Human Body and Mind with an Account of the Means of Preventing, and of the Remedies for Curing Them*. Philadelphia: Manning & Loring, 1812.
Benjamin Rush, a signer of the Declaration of Independence, a physician, and the nation's first Surgeon General, published a monograph on alcoholism as a medical concern, one of the very few works prior to this century conceptualizing alcoholism as a medical disorder. Treatment of the alcoholism per se is not discussed, but events that have induced "spontaneous remission" are described. (NB. This has been reprinted in both the *Journal of the Studies on Alcohol* and *Alcohol, Health and Research World*.)

1917 Richmond ME. *Social Diagnosis*. New York: Russell Sage Foundation. 1917.
This social work pioneer in her work on diagnosis, characterized the condition of "inebriety"—the condition now described either as alcoholism or alcohol dependence—as "a disease." Thus, this social work practitioner-educator, in her approach to the alcoholic patient, was among the very first to recognize and discuss the phenomenology associated with inebriety (alcohol dependence) as a disease process.

1939 Alcoholics Anonymous World Services, Inc. *Alcoholics Anonymous*. Third Edition. New York: Alcoholics Anonymous World Services, Inc., 1976. 575 pp.
This book was first published in 1939, by the early members of Alcoholics Anonymous, as a vehicle to describe the Fellowship and how it worked, and to share its experience and hope with those "still suffering" individuals. It is frequently described as "The Big Book" or "the basic text for AA". Though having gone through multiple updates and printings, the initial chapters remain as initially drafted. What are now known as "the 12 Steps" were originally set forth in a chapter on "How it Works." Interestingly these steps were set forth not as "prescriptions", but were written in the past tense drawing from the early members experiences, to share what seemingly had been the common elements in their recoveries. The second section that provides first person accounts by individuals has been enlarged and expanded, containing contemporary accounts as well as the stores of the early members.

1943 Horton D. The functions of alcohol in primitive societies: A cross-cultural study. *Q J Stud Alcohol* 4:199-320, 1943.
Given psychoanalytic theory as the dominant psychological framework of the late 1930s and '40s, anxiety was generally postulated as a major factor contributing to the rise of alcoholism. Horton, an anthropologist sought to examine this hypothesis by looking a number of "primitive societies." He considered different social

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groups in terms of the anxiety presumed to be present, e.g. due to factors such as the level of certainty about the food supply, the placid or violent relationships with neighboring groups; and also ascertained the drinking patterns and determined their relationship to the level of cultural anxiety.

1946 Bales R. Cultural differences in rates of alcoholism. *Q J Stud Alcohol* 6:480-499, 1946. (16 refs)
It has been long recognized that in considering the origins of alcohol problems and alcoholism one must look not only at the individual but also society. Different countries were recognized as having different rates of alcoholism. Bales describes four different cultural orientations toward drinking and their role in influencing the culture's rate of alcoholism. The effects of a cultural orientation toward alcohol or other drug use continue to influence the understanding of the the origins of alcohol and other drug problems, and thereby influence public policy and program development.

1952 Jellinek EM. Phases of alcohol addiction. *Q J Stud Alcohol* 13:673-684, 1952. (41 refs)
Jellinek is often described as the father of modern alcohol studies. In this work he sets forth the natural history, the progression of the disease of alcoholism. The study was based upon a survey of 2,000 early AA members, each of whom identified the order of symptom appearance. This study has continued to influence current views of the course of alcoholism.

1953 Tiebout HM. Surrender versus compliance in therapy, with special reference to alcoholism. *Q J Stud Alcohol* 14:58-68, 1953. (6 refs)
In distinguishing between surrender versus compliance, Dr. Tiebout addressed a concept that had special meaning for the early members of AA. Some of the points in his work have influenced professional treatment approaches and continue to leave their mark within the Fellowship, particularly what is perceived as required to follow the therapeutic regimen of AA. Surrender is distinguished from compliance and seen as an essential precursor for "acceptance." It takes place at the conscious level but more importantly the unconscious level, with a recognition of a fundamental inability to solve problems (handle alcohol) alone. This in turn provides the impetus for and ability to reach out for help, and allows one to achieve psychological growth and change. In contrast "compliance" is viewed as a conscious or rational acceptance but unconsciously resisting the need for change, creating a state of tension, strain and conflict, and often blocking surrender.
Available as a monograph through the National Council on Alcoholism.

1953 Tiebout HM. Direct treatment of a symptom. IN: *Problems of Addiction and Habituation*. New York: Grune & Stratton, 1953.
A dynamically oriented psychiatrist, Tiebout had several early AA members as patients. He recognized that some of the basic premises of analysis simply were not appropriate in alcoholism treatment. This paper outlines the need to treat the phenomena of alcoholism directly, rather than to address underlying emotional issues that might be promoting alcohol use. Specifically he cites the need to address the drinking behavior, addressing an alcoholic's not taking the first drink and what must be done therapeutically if the alcoholic is to remain sober. This perspective ran counter to psychoanalytic tenets and was at that time virtual heresy. The approach suggested has emerged as a basic principle of alcohol and drug treatment. Subsequent biological research has suggested physiological mechanisms, such as the nature of addiction and the associated cognitive

impairments, that may be seen as explaining its efficacy.
Available as a monograph from the National Council on Alcoholism.

1954 Jackson JK. The adjustment of the family to the crisis of alcoholism. *Q J Stud Alcohol* 15(4):562-586, 1954. (9 refs)
Through a study of members of the "AA Auxiliary", the predecessor for what became Al Anon, the author identified a seven step progression in a family's adjustment to the presence of an alcoholic member. This progression continues to inform discussions of alcoholism's effects on the family. The stages are Denial, to Efforts to Eliminate the Problem, followed by the stages of Disorganization, Efforts to Reorganize despite the Problem, Efforts to Escape the Problem, which may entail a dissolution of the marriage, and leading either to Reorganization of Part of the Family or Recovery and Reorganization of the Whole Family.

1959 McCord W; McCord J. Some current theories of alcoholism: A longitudinal evaluation. *Q J Stud Alcohol* 20:727-749, 1959.
A significant research dilemma in efforts to ascertain the influence of emotional and personality factors upon the origins of alcohol or other drug dependence is that the individuals most easily studied are already alcohol or drug dependent. In that case the research requires efforts to define retrospectively the premorbid personality. The preferred methodology is a longitudinal prospective study to allow comparisons between those who do and who do not become alcoholic or drug dependent and to allow a clear assessment of personality prior to the emergence of symptoms. This study by the McCords was the first to use such a longitudinal, prospective research design. The Ss had been closely studied many years earlier and initially recruited as part of a research project to explore the origins and precursors of juvenile delinquency.

1968 Bailey MB, ed. *Alcoholism and Family Casework: Theory and Practice*. New York: New York Affiliate, National Council on Alcoholism, 1968. 162 pp.
This book was derived from a training program offered to family casework agencies by the New York affiliate of the National Council on Alcoholism. The philosophy of the training was that skills in dealing with alcohol problem of clients and family were required for all family caseworkers, not simply a few specialists. This book was long *the* most authoritative and thoughtful work for those seeking a professional orientation to alcoholism treatment.

1970 Cahalan D. *Problem Drinkers: A National Survey*. San Francisco CA: Jossey-Bass, 1970. 202 pp.
This often cited work presents and discusses the findings of a national survey involving personal interviews, in respect to alcohol use patterns, the prevalence of alcohol problems, and the correlates of problems in terms of quantity of use, demographic variables, social and personality characteristics. While not directed at alcoholism per se, the findings forced a rethinking of many of the assumptions then made about alcoholism.

1970 Vaillant G. The natural history of narcotic drug addiction. *Seminars in Psychiatry* 2:486-498, 1970. (27 refs.)
This paper explores the natural history of narcotic addiction to assess the then current opposing viewpoints that "once an addict, always an addict" or that addicts by age 40 tend to "mature out of addiction." It is based upon two large samples, a stratified sample of all Kentucky state residents admitted to the state's primary treatment resource, the Federal narcotics hospital, and Lexington Hospital in New

York City, the principle voluntary treatment resource for the city's narcotic addicts. Based upon follow-up of these admissions, the natural course of addiction is described. Among the significant features were the following: 1) Over time, narcotics addicts have alternating periods of use and abstinence. 2) Narcotic addicts tend to be a multiple drug users; at some point 82% of the males in the Kentucky sample and 33% of the women would be diagnosed as alcoholic. 3) For the members of the sample that were defined as achieving permanent abstinence, the major predictor was a stable history of employment. 4) "Therapeutic" variables related to abstinence were not incarceration or hospitalization, which influenced only the short run. For the rural sample, a dramatic lessening of availability of narcotics was the significant factor. For the urban sample where availability was unchanged, positive influences were community-based compulsory supervision, i.e. parole, and the introduction of some substitute for narcotics use as a source of gratification and support.

1971 Goodwin DW. Is Alcoholism Hereditary? *Arch Gen Psychiatry* 25:545-549, 1971. (35 refs.)
Long observed that alcoholism runs in families, nonetheless the task of separating the influences of nature vs. nurture is difficult. This article presents the early, key studies that demonstrated the role of heredity in some cases of alcohol dependence.

1972 Schuckit MA; Goodwin DW; Winokur G. A study of alcoholism in half siblings. *Amer J Psychiatry* 128(9):122-126, 1972. (16 refs)
This study is significant in helping to distinguish between the impact of nature and nurture in the development of alcoholism. Four groups were studied: half-siblings one of which had a biological parent who had alcoholism and and the other did not, and those raised in and outside the home with an alcoholic parent. Having a biological parent who was alcoholic proved to be the significant risk factor. Being reared in a home with an alcoholic parent did not further increase the risk for those with a positive family history, nor increase the risk for those without a positive family history.

1973 Johnson V. *I'll Quit Tomorrow*. New York: Harper and Row, 1973. 192 pp.
Unlike other works included here, this material was not published in a scientific journal, but promulgated through this book and a movie by the same name. This work introduced the technique of "the intervention", a method to initiate treatment. The use of "interventions" promoted earlier treatment and prompted care for those previously seen as either "unready" or "inaccessible". The adoption of this clinical approach dispelled the myth that a patient's apparent motivation to cease use is a significant factor in determining treatment outcome, thus revolutionizing alcohol treatment, and by example, drug abuse treatment as well. This work also introduced the concept of "enabling", i.e. the interactions of the family and the alcoholic which unwittingly support the continuation of drinking or drug use. Efforts to counter these behaviors, tied to the framework of the "intervention", offer family a constructive role, beyond "detachment with love", the primary orientation of Al Anon, the self-help group for family members.

1976 Kalb M; Propper MS. The future of alcohology: Craft or science? *Am J Psych* 133(6):641-645, 1976. (29 refs)
The authors discuss the problems that have resulted from the influx of professionals into the field of alcoholism, which has historically been dominated by paraprofessionals workers. The interaction of the professional, who operates from a scientific model, with the paraprofessional whose model of treatment has

followed craft lines, has created unique problems and tensions. A synergism has been created which has been detrimental rather than complementary. The authors suggest that the future of the alcohol field will have to be established along craft (paraprofessional) or scientific (professional) lines because the two models cannot profitably co-exist. (Authors' Abstract)

1978 Sobell MB; Sobell LC. *Behavioral Treatment of Alcohol Problems*. New York: Plenum Press, 1978.
The Sobells have been among the most prolific researchers in the behavioral quarter of the the research-treatment community. This work includes a summary of a project involving a training regimen using behavioral paradigms that was reported successfuly to replace addicted uncontrolled use with a pattern of "controlled drinking."

1982 Pendery ML; Maltzman IM; West LJ. Controlled drinking by alcoholics?: New findings and a reevaluation of a major affirmative study. *Science* 217(4555):169-175, 1982. (30 refs)
Controlled drinking has recently become a controversial alternative to abstinence as an appropriate treatment goal for alcoholics. In this study we reexamine the evidence underlying a widely cited report by Sobell and Sobell of successful controlled drinking by a substantial proportion of gamma (physically dependent) alcoholic subjects in a behavior therapy experiment. A review of the evidence, including official records and new interviews, reveals that most subjects trained to do controlled drinking failed from the outset to drink safely. The majority were hospitalized for alcoholism treatment within a year after their discharge from the research project. A 10-year follow-up (extended through 1981) of the original 20 experimental subjects shows that only one, who apparently had not experienced physical withdrawal symptoms, maintained a pattern of controlled drinking; eight continued to drink excessively—regularly or intermittently—despite repeated damaging consequences; six abandoned their efforts to engage in controlled drinking and became abstinent; four died from alcohol-related causes; and one, certified about a year after discharge from the research project as gravely disabled because of drinking, was missing. (Authors' abstract)

Note: These two papers represent one of the most significant, strident, and continuing controversies in the alcohol-drug field, i.e. whether "controlled drinking" (or drug use) is a suitable alternative to abstinence as a treatment goal. See: *J Stud Alcohol* 50(5):465-486, 1989, which contains an article on the topic, an editor's note and two invited responses.

1983 Woititz J. *Adult Children of Alcoholics*. Hollywood FL: Health Communications, Inc., 1983. 106 pp.
One of the first popular handbooks on the topic and widely read in both the counselor and lay communities, it has been the source of many of the precepts that have influenced both professional treatment and self-help approaches.

1984 Robins LN; Helzer JE; et al. Lifetime prevalence of specific psychiatric disorders. *Arch Gen Psychiatry* 41:949-958, 1984. (21 refs)
A study of lifetime prevalence of 15 (DSM III) major psychiatric disorders was conducted to ascertain the prevalence rates and demographic correlates. Alcohol abuse/dependence was the most common disorder, with a prevalence ranging from 11.5% to 15.7% , a rate virtually twice as high as the second most common problem and three times greater than drug abuse/drug dependence. For 18-24 year olds drug disorders was the most common diagnosis, followed closely by alcohol abuse/dependence. For ages 25 to 64 years, alcohol abuse/dependence was the

most common disorder. In terms of demographic correlates, for level of urbanization, significant differences existed only between the extremes, with a prevalence of 19.4% for central city vs. 14% small town/rural; alcohol and drug disorders are male predominant, and neither race nor education are associated with prevalence rates.

Section III

Other Resources

Comments

- This section is comprised of two parts, *Organizations* and *Newsletters*, both of which are drawn from the alcohol and drug fields.
- For each organization, in addition to the name, address, telephone number, the name of a contact person, and a brief description, there is also a listing of items produced or available from the organization that may useful to social work faculty. In many instances these are free or have only a nominal charge.

Organizations*

1. **Addiction Research Foundation (ARF)**
   33 Russell Street, Toronto, Ontario Canada, M5S 2S1. 416/595-6144. (Library).
   Organized in 1949 as an agency of the Province of Ontario, the Addiction Research Foundation provides treatment, conducts research, and disseminates information about alcoholism and drug addiction. The Foundation is significant to those outside the province for its educational materials and information services. There is also an Office of Native Services to provide specialized services and programs tailored to the needs of Native Peoples.
   RESOURCES
   Education Materials Catalog. Describes pamphlets, posters, periodicals, books, conference proceedings and videocassettes for health care professionals and for the general public. 80 pp. Free.
   Film List. Describes the ARF film collection on alcohol, drugs and smoking. Each film is annotated with an evaluation rating and audience level. Updated annually.
   The Journal. Monthly newspaper that provides information on current research and issues of public policy in both Canada and the U.S. Reviews books and audiovisual materials. Ca. $24/year.
   Projection. A monthly audiovisual review service. Ca. $16/year.

2. **Adult Children of Alcoholics Interim World Service Organization**
   P.O. Box 3216, 2522 W. Sepulveda Blvd., Torrance CA, 90505. 213/534-1815.
   This is a 12 Step, 12 Tradition program of recovery for adults who were raised in a home with parental alcoholism. It offers information about and referrals to meetings throughout the country.

3. **Al-Anon Family Group Headquarters, Inc.**
   P.O. Box 862, Midtown Station, New York NY, 10018-0862. 212/302-7240.
   Al-Anon, which includes Alateen, is a fellowship for families, relatives, and friends of alcoholics. It meets in 81 countries and has over 22,000 groups including 3,200 Alateen groups.
   RESOURCES
   Al-Anon Speaks Out...: A Community Resource for Professionals. Semi-annual newsletter. Provides an explanation of the Al-Anon/Alateen program and how it works, reports on developments and items of interest in the Fellowship, and explains how members cooperate with the professional community. Free.
   Alateen Tells It Like It Is. VHS 16 minutes, 1988.

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Created with artwork by a teen-age girl, featuring a young narrator and two other teenagers who share what growing up in an alcoholic home is like, how they found Alateen, and why they stayed. Directed at the general public and the professional community. $25.

Catalog of Conference-Approved Literature and Materials. Free.

Is Alcohol a Problem in Your Family? A multi-cultural poster designed to attract minority youth to Alateen. Free.

Who Are the Members of Al-Anon and Alateen? 1987 Survey. Reports the results of the second, self-conducted membership survey that describes the demographic characteristics of Al-Anon, the pattern of attendance, sources of members' referral to the organization, and the member's relationship to the individual with an alcohol problem.

4. **Alcoholics Anonymous General Services Office (AA)**
Box 459 Grand Central Station, New York NY, 10163. 212/686-1100.
The AA General Services Office responds to inquiries about the Fellowship. It prepares and distributes literature, including lists of the 40,000 AA groups in the U.S. and Canada, and maintains links with local AA groups. The AA literature and audiovisual materials are directed to alcoholics, AA members and human service and health care professionals.
RESOURCES
Conference-Approved Literature and Other Service Materials. Catalog of printed and audiovisual materials. 8 pp. Free.
AA as a Resource for the Health Profession (P-23). Pamphlet. Suggests approaches for referring clients with drinking problems to AA. 15¢.
AA in Treatment Centers (P-27). Pamphlet. Describes the experience of treatment facility administrators and of AAs who have worked with treatment centers.
About AA. Quarterly newsletter for professionals. Free.
Alcoholics Anonymous: An Inside View. 16mm film/VHS. 28 minutes, 1979.
Directed to professionals and middle America. Includes scenes of AA meetings and other activities of recovering members. Rental: 16mm $35/week. Long term lease available. Purchase: VHS $15.
If You are a Professional, AA Wants to Work With You (P-46). Pamphlet. 15¢.
It Sure Beats Sitting in a Cell. 16mm film/VHS. 17 minutes.
Photographed inside correctional facilities in the U.S. and Canada it tells the story of four young AAs who were in prison as a result of drinking, yet now are sober in AA. Rental: 16mm $35/week. Long term lease available. Purchase: 16 mm $100, VHS $15.

5. **American Council for Drug Education (ACDE)**
204 Monroe Street, Rockville MD, 20850. 301/294-0600.
A non-profit organization, the ACDE slogan is "Fight Drug Abuse with Facts". The Council publishes and distributes scientific monographs, brochures, reprints, books, kits, pamphlets, and films.
RESOURCES
Membership information and Catalog of Materials. Free.

6. **Section on Alcohol and Drugs, American Public Health Association (APHA)**
1015 Fifteenth Street N.W., Washington DC, 20005. 202/789-5600.
The Section on Alcohol and Drugs of the American Public Health Association (APHA), an organization with over 50,000 members and organized into 23 special Sections, was created in 1985. The Section is comprised of researchers and professionals with an interest in the public health approach to alcohol, tobacco and

drug issues. Section membrs have been instrumental in the Association's adoption of resolutions on alcohol advertising, tobacco promotion and advertising, tobacco taxation, and fetal alcohol syndrome. The Section sponsors sessions at APHA's annual conference.

RESOURCES

Membership information and catalog of books, monographs and reports published by APHA. Free.

Alcohol and Drugs, a newsletter for Section members.

7. **Children Are People Too (CAP)**

Barbara Naiditch, Director, 493 Selby Avenue, St. Paul MN, 55102. 612/227-4031.

Started in 1977, CAP is a nonprofit agency exclusively committed to the prevention of alcohol and drug use among children ages 5-12. It offers services in three program areas: training programs for adults who want to develop support groups for young children; awareness seminars for school and community groups; and curricula for elementary school age children.

RESOURCES

The Support Group Kit. Materials to assist new and experienced group leaders in conducting support groups for children ages 5-12. Includes a training manual and educational/visual aids. $69.99.

Curriculum. A prevention program for elementary children. $23.10/grade levels K-3; $27.50/grade levels 4-6.

8. **Cocaine Anonymous**

5125 Washington Blvd., Suite 202, Culver City CA, 90230. 213/839-1141.

Founded in 1982 by a long-standing Alcoholics Anonymous member, and structured along the lines of AA, there are a growing number of meetings in areas across the country. Coc-Anon program is also available for affected family members.

RESOURCES

Fact File. Free.

9. **Employee Assistance Professionals Association (EAPA), formerly ALMACA**

4601 North Fairfax Drive, Suite 1001, Arlington VA, 22203. 703/522-6272.

Founded in 1971 as the Association of Labor-Management Administrators and Consultants on Alcoholism (ALMACA) the organization changed its name in 1989. It currently has almost 6,000 members engaged directly in the practice of employee assistance programming. EAPA's objectives are to promote the development of employee assistance programs (EAP) in both the public and private sectors and to provide professional identification for all persons in the EAP field. It's Employee Assistance Certification Commission has been certifying EAP professionals by examination since 1987. A national conference is held every fall. The organization runs an EAP Clearinghouse which produces publications, publishes a newsletter, *Info-Line*, and responds to information requests.

RESOURCES

Information on membership and the clearinghouse. Free.

Handbook for Certification Examination Candidates. Free

10. **Hazelden Foundation**

Box 11, Center City MN, 55012. 800/822-0800 (Training and Education), 800/328-9000 (Educational Materials), 800/257-7800 (Hazelden-Cork Sports Center).

Founded in 1949, Hazelden is a national leader in the treatment of what it terms "chemical dependency", and is the prototype of the "Minnesota model" of treatment. Its services include inpatient and outpatient, adult and adolescent treatment conducted

at seven locations. Its Employee Assistance Program serves more than 200,000 employees and family members nationwide. Hazelden conducts numerous workshop and training programs for alcohol counselors and health professionals both at its main quarters in Minnesota, and around the country. Of special note is a week-long "Professionals in Residence Program" which combines experiential learning with lectures and discussion with program staff. Hazelden is a major publisher of literature in the alcohol-drug fields.

The Hazelden-Cork Sports Education Program brings together professionals in health education, exercise physiology, and student assistance to plan programs and develop materials for use with athletes. It conducts regular workshops for student leaders, student athletes, coaches, and athletic and activity directors.

RESOURCES

Educational Materials Catalog. Books, pamphlets, films, audiocassettes, posters, and other specialty items. Free.
Calendar of Continuing Education Opportunities. Workshop descriptions. Free.
Hazelden Professional Update. Quarterly newsletter for professionals. Free.

11. **Johnson Institute**
7151 Metro Boulevard, Minneapolis MN, 55435. 800/231-5165; In MN 800/247-0484; In Canada 800/447-6660.
Established in 1966, the Institute introduced and developed the concept and practice of intervention, a technique to move into treatment those with problems related to chemical dependency. It conducts educational and training programs, offers consultation services and is a major producer of films, videos and printed materials.
RESOURCES
Publications, Films and Audiocassettes Catalog. Free.
Catalog of Training Programs. Free.
Observer, a newsletter. Free.

12. **Multicultural Training Resource Center**
1540 Market St., Suite 320, San Francisco CA, 94102. 415/861-2142.
Established in 1984, the Center offers multicultural and culturally specific substance abuse prevention services and AIDS prevention services to health care providers. The Center's concept of multiculturalism is not limited to race, ethnicity and color, but includes all cultural groups e.g. women, elderly, lesbian/gay and the homeless. Services include information, technical assistance, training and assistance in materials development. The Center's library collects printed and audiovisual materials. A reference specialist conducts computer searches for organizations and individuals. Selected articles and pamphlets are available for bulk distribution.
RESOURCES
Description of the Center's Services. Free.
Materials Order Form. Free.

13. **Narcotics Anonymous**
P.O. Box 9999, Van Nuys CA, 91409. 818/780-3951.
Narcotics Anonymous is a 12 step, self-help group for drug dependent persons, modeled after Alcoholics Anonymous.
RESOURCES
Publications Catalog. Free.

14. **National AIDS Information Clearinghouse (NAIC)**
P.O. Box 6003, Rockville MD, 20850. 301/762-5111.

Operated by the U.S. Centers for Disease Control, the Clearinghouse is an information service for health professionals and the general public. Staff specialists are available to answer questions, make referrals, and suggest publications pertaining to AIDS. The Clearinghouse maintains two databases, a *Resource Database* that is a directory of organizations providing AIDS-related services and resources, and *Educational Materials Databse* that includes educational materials produced throughout the nation. NAIC's reference specialists conduct database searches and mail the results within five days. NAIC distributes single and bulk copies of selected AIDS publications available from the U.S. Public Health Service and other organizations.

RESOURCES

User's Guide . Free

15. **National AIDS Hotline**

P.O. Box 6003, Rockville MD. 20850. 800/342-AIDS (English) 800/344-SIDA (Spanish).
Operated by the U.S. Centers for Disease Control as a part of the National AIDS Information Clearinghouse, the Hotline answers questions about AIDS and offers referrals to appropriate services 24 hours a day.

16. **National Association for Children of Alcoholics, Inc. (NACoA)**

31706 Coast Highway, Suite 201, South Laguna CA, 92677-3044. 714/499-3889.
NACoA was founded in 1983 by an interdisciplinary group of therapists, educators, authors and medical professionals. It supports, and serves as a resource for, children of alcoholics of all ages and for those in a position to help them. Its activities include running a clearinghouse to distribute information, developing training opportunities for both professionals and the lay public, publishing a quarterly newsletter, and holding an annual convention.

RESOURCES

List of Clearinghouse Publications. Free.
Information packet about NACoA. Free.

17. **National Association for Native American Children of Alcoholics (NANACoA)**

Contact: Anna Laumer, NANACoA. Seattle Indian Health Board, P.O. Box 3364, Seattle Washington, 98114. 206/324-9360.
Organized at the 1988 Annual Convention of the National Association for Children of Alcoholics by more than 70 Native Americans from 30 different tribes NANACoA is a nonprofit national organization that serves as a source of information and support for Native American children of alcoholics. Activities have included planning a National Conference for Native American Children of Alcoholics in 1989, establishing a national network and newsletter, and increasing community awareness and recognition of the needs of Native American children of alcoholics.

18. **National Clearinghouse for Alcohol and Drug Information (NCADI)**

P.O. Box 2345, Rockville MD, 20852. 301/468-2600.
Created in 1987 through a merger of the former National Clearinghouse for Alcohol Information and the National Institute for Drug Abuse Information, NCADI is the hub of a national network that coordinates communication between state drug and alcohol agencies, information centers, federal agencies and public and private sector groups. NCADI develops and distributes pamphlets, booklets, reports and posters on alcohol and other drugs with a special focus on high-risk groups and publications, reports, and other materials produced by the National Institute on Alcohol Abuse and Alcoholism (NIAAA), the National Institute on Drug Abuse (NIDA) and the Office for Substance Abuse Prevention (OSAP) can also be secured through NCADI. Most materials are

available without charge. Selected films and videotapes including several from the Department of Education can be borrowed without charge through Modern Talking Picture Service. Specialized information needs are met through searches on the NCADI databases or by referral to other organizations.

In 1987 the Regional Alcohol and Drug Awareness Resource Network (RADAR) was established to include at least one center in every state and territory. These RADAR Centers will provide local access to NCADI resources.

RESOURCES

Prevention Pipeline: An Alcohol and Drug Awareness Service. Bimonthly $15/year.

List of Audiovisuals in Free Loan Program.

The reports and publications of the National Institute on Alcohol Abuse and Alcoholism, National Institute on Drug Abuse, and the Office for Substance Abuse Prevention

19. **National Council on Alcoholism (NCA)**

12 W. 21st St., New York NY, 10010. 212/206-6770; 800/NCA-CALL (hot line for referrals).

NCA is a national nonprofit organization that has been providing public information and promoting enlightened public policy in the alcohol field since 1944. With its main office in New York, it has over 200 state and local affiliates nationally. Activities include public information campaigns, disseminating medical-scientific information, serving as an advocate and lobbyist for issues of public policy, hosting conferences and publishing literature. The Council conducts the National Alcoholism Forum, a general interest conference on alcohol-related issues for health care professionals, and staff and volunteers of affiliate groups. During the Forum a number of professional associations hold their annual meetings.

RESOURCES

Catalog of Publications, 1988. 6 pp. Free.

20. **National Drug Information and Treatment Hotline**

Social and Scientific Systems, Inc, 12280 Wilkins Ave., 1st floor, Rockville MD, 20852. 800/662-HELP

Operated under contract with the National Institute for Drug Abuse (NIDA), the Hotline offers information about illicit and prescription drugs and sources of referrals for treatment.

21. **National Self-Help Clearinghouse**

25 West 43rd St., New York, NY 10036. 212/642-2944.

This clearinghouse conducts professional training about self-help methods, carries out research activities, maintains an information and referral databank, publishes materials, and addresses professional and policy groups about policies affecting self-help organizations.

RESOURCES

Self-Help Reporter. Quarterly. $10.

How to Organize a Self-Help Group. $6.

Organizing a Self-Help Clearinghouse. $5.

New Dimensions in Self-Help. $5.

22. **Office of Minority Health Resource Center (OMHRC)**

P.O. Box 37337, Washington, DC 20013-7337. 800/444-6472; 301/587-1938.

In 1987, the Office of Minority Health of the U.S. Department of Health and Human Services established a Resource Center focused upon the six areas that account for more than 80 percent of the excess deaths among minorities. These include cancer, cardiovascular and cerebrovascular disease, chemical dependency, diabetes,

homicide, suicide and unintentional injuries and infant mortality. The Office of Minority Health Resource Center is developing a database of minority health-related materials, organizations and programs, and offers information services. It provides free or low-cost services and materials to health professionals.

RESOURCES

Closing the Gap. A series of fact sheets describing health problems of the six priority areas and avenues for prevention. Free.

Consultation and Referral. A resource network of professionals in a variety of disciplines who provide technical assistance to OMH and OMHRC staff are available to others on issues related to minority health issues. Free.

23. **Smokers Anonymous World Services (SA)**

2118 Greenwich St, San Francisco CA, 94123. 415/922-8575.

The purpose of SA is to help members and others to live without smoking using the Twelve Step self-help program model adopted from Alcoholics Anonymous.

RESOURCES

Seven Minutes: A Forum for Smokers Who Don't Smoke. Quarterly newsletter. $5.

Meeting List. National list of meeting places and contacts.

Newsletters*

1. *About AA: A Newsletter for Professional Men and Women*

Alcoholics Anonymous is a self-help "fellowship of men and women who share their experience with each other and help others to recover from alcoholism." The newsletter reports AA activities and describes information about resources available through AA. Recent issues discussed AA in prisons and presented a demographic report of AA membership. Directed at health care providers, this single sheet letter is useful to anyone interested in AA programs.

Alcoholics Anonymous, Box 459, Grand Central Station, New York, NY 10163. Quarterly. Free.

2. *The Addiction Letter: A Resource Exchange for Professionals on Preventing and Treating Alcoholism and Drug Abuse*

The *Letter* includes practical information for professional counselors in signed articles, book reviews, abstracts of articles from current journals, and editorials.

Manisses Communications Group, Inc., P.O. Box 3357, Wayland Square, Providence, RI 02906-0357. Monthly. $87/year.

3. *Al-Anon Speaks Out*

This is a single sheet newsletter directed at community professionals. Issues have included articles about support by Al-Anon for adult children of alcoholics and a report of the first Al-Anon/Alateen survey.

Al-Anon Family Group Headquarters, Inc., Box 182, Madison Square Station, New York, NY 10159-0182. Annual. Free.

4. *Alcohol Clinical Update*

A publication of the Project Cork Resource Center, the newsletter includes selected information from that acquired by the Resource Center. Each issue contains author abstracts of recent journal articles, a column of newly published books and reports, and topical reviews, on subjects such as treatment outcome, insurance coverage or

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resources for prevention programs on college campuses. It is directed to health care professionals including clinicians, medical educators, and treatment program administrators.
Project Cork Institute, Dartmouth Medical School, Hanover, NH 03756. Bimonthly. $28/year, $32/year outside U.S.

5. *Alcoholism & Drug Abuse Week*
This weekly newsletter offers timely reports on national trends and developments in funding, policy, prevention, treatment and research in alcohol and other drug abuse as well as issues on certification, reimbursement and other news of interest to treatment agencies.
Manisses Communications Group, Inc., P.O. Box 3357, Wayland Square, Providence, RI 02906-0357. 401/831-6020. Weekly. $295/year.

6. *The Alcoholism Report: The Authoritative Newsletter for Professionals in the Field of Alcoholism*
The *Report* provides current awareness services focusing on national activities with implications for alcoholism treatment. It includes extensive coverage of congressional and federal agency activities. The *Report* publishes news of proposed and enacted legislation, detailed descriptions of committee hearings, funding appropriations and actions of national task forces. News briefs from treatment facilities, such as changes in leadership or programs are included. Names, addresses, and phone numbers are provided for quick ordering of reports or to request further information.
Manisses Communications Group, Inc., P.O. Box 3357, Wayland Square, Providence, RI 02906-0357. 401/831-6020. Monthly. $97/year.

7. *DATA: The Brown University Digest of Addiction Theory and Application*
Members of the multidisciplinary Brown University Center for Alcohol and Addiction Studies digest selected clinically-relevant research published in scholarly journals in the United States and other countries. The findings are presented in a readable newsletter format for those who have a professional or personal interest in the problems of alcoholism and other drug dependence.
Manisses Communications Group, Inc., P.O. Box 3357, Wayland Square, Providence, RI 02906-0357. 401/831-6020. 8 issues/year. $79/year.

8. *Drug Abuse and Alcoholism Newsletter*
Published by the Vista Hill Foundation, a multi-hospital nonprofit organization, the newsletter is directed at the general public as well as the professional. Each issue provides an authoritative synopsis on a single topic such as *Alcohol and Nutrition*, or *Cocaine*.
Vista Hill Foundation, 3420 Camino Del Rio North, Suite 100, San Diego, CA 92108. 10 issues/year. Free.

9. *The Journal*
Published by the The Addiction Research Foundation, an agency of the Province of Ontario, Canada *The Journal* provides news coverage of issues related to drugs and alcohol. Published in newspaper format, it features governmental activities and policy decisions; in-depth articles on specific topics; film and book reviews; and notices of meetings in Canada, the U.S. and abroad. Although the focus is on Canada and the United States, the coverage is international.
Marketing Services, Addiction Research Foundation, Dept. KM, 33 Russell Street, Toronto, Canada M5S 2S1. Monthly. Canada Ca$16/year. U.S. Ca$24/year.

10. *NASADAD Alcohol and Drug Abuse Report*
Two reports are published monthly. The *Monthly Report* focuses on current activities within the congressional and executive branches. The *Special Report* provides in-depth coverage of topics such as private health insurance for alcohol and drug dependency treatment services, and prevention research in alcohol and drug abuse. The focus of both reports is on programs, rather than clinical care.
National Association of State Alcohol and Drug Abuse Directors, 444 North Capitol Street, NW, Suite 530, Washington DC, 20001. Semimonthly. $55/year.

11. *Of Substance: A Newsletter for the Substance Abuse Treatment Community*
The Legal Action Center is a nonprofit, public interest organization that offers legal representation and counseling to ex-offenders, recovering alcohol and drug abusers, and to the programs and agencies assisting in their rehabilitation. *Of Substance* covers legal developments and issues in treatment. Included in the topics covered are reports on federal and state laws that protect recovering alcoholics from employment discrimination and also reports on issues of compliance with federal regulations governing confidentiality of records.
Legal Action Center, P.O. Box 6825, Syracuse NY, 13217. Bimonthly. $35/year.

12. *Prevention Pipeline*
This bimonthly newsletter, published by the U.S. Office for Substance Abuse Prevention, (OSAP) provides an update on activities in the substance abuse field. It is directed at a broad range of professionals including educators, researchers, information specialists, administrators and policymakers, and those planning and administering community programs. Issues offer updates on OSAP's program activities, reprints of articles, summaries of research findings, descriptions of new audiovisual and print materials, and a listing of alcohol and drug conferences.
National Clearinghouse for Alcohol and Drug Information, Dept. PP, P.O. Box 2345, Rockville MD, 20852. Bimonthly. $15/year.

13. *The U.S. Journal of Drug and Alcohol Dependence*
Intended to be a national trade publication for professionals, *The U.S. Journal* provides broad news coverage in the area of drug and alcohol dependence. In newspaper format, it covers research, agency news, state and federal regulations and laws, as well as insurance and general interest topics. Special sections focus on public policy, the private sector, EAPs and barriers to treatment. Announcements of upcoming meetings and a classified section are included.
United States Journal of Drug and Alcohol Dependence, Inc., The Enterprise Center, 3201 S.W. 15th St., Deerfield Beach FL, 33442. Monthly. $49/year.

14. *The NACoA Network*
The National Association for Children of Alcoholics is an advocacy organization offering publications, workshops and conferences, and serving as a clearinghouse and lobbyist for the development of programs for this group. *The NACoA Network* offers news of the Association and articles of interest to children of alcoholics and treatment professionals.
National Association for Children of Alcoholics, 31706 Coast Highway, Suite 201, South Laguna CA, 92677. Quarterly. Membership (includes subscription): Low Income $20. Regular $50. Professional. $100.

Section IV
Resources for Faculty

Comments

- The materials in this section are grouped into four different areas: Professional Education, Curriculum Materials, The Impaired Colleague, and Sources of Information.
- The items found under Professional Education are not exclusively directed to Social Work Education. However, the materials addressing professional education in other clinical disciplines were selected because the themes and issues discussed are generic and applicable to social work training and education.

Professional Education

1. Craig RJ. Diagnostic interviewing with drug-abusers. *Prof Psychol Res Pract* 19(1):14-20, 1988. (49 refs.)

Principles of diagnostic interviewing with adult male drug abusers are discussed in the light of changing concepts of addiction/dependency, confidentiality, and countertransference, and basic ideas, and the article concludes with some practical recommendations for interviewing substance abusers. (Author Abstract)

2. *Kinney J; Price TRP; Bergen B. Impediments to alcohol education. *J Stud Alcohol* 45(5):453-459, 1984. (17 refs.)

Two major forces mitigate against alcohol education within the medical school curriculum. One relates to the structure and organization of academic medicine with its emphasis on disease states and pathophysiology; sophisticated and technologically complex diagnostic and treatment modalities; and an acute illness, cure-oriented focus rather than a chronic illness, adaptational approach to illness. The second constellation of factors relates to the alcoholism's field failure to identify with other issues in health care and medical education that similarly challenge the Flexnerian curriculum: the lack of a conceptual basis for defining the physician-alcoholism specialist in relation to other medical disciplines; the clinical treatment field's competing craft and professional orientation; and the absence of a vocabulary suited to the existing biopsychosocial paradigms. It is suggested that these impediment could be overcome if the alcoholism field defined the model for managing chronic illness that is implicit in alcoholism treatment. (Authors' Abstract)

3. *Kinney J; Price TRP; Whybrow PC. *Project Cork: A Case Study in Designing and Implementing a An Alcohol Curriculum in Medical Education*. Hanover NH: Project Cork Institute, 1986. 304 pp.

This monograph reviews the process of designing and implementing a model integrated alcohol/alcoholism curriculum in medical student education. Beyond the case study outlining the process for implementing the four year program, appendices outline the model curriculum, evaluation design and instruments, and different models for clinical training. A selected bibliography is included. (Project Cork Institute)

4. Liepman MR; Anderson R; Fisher JV. *Family Medicine Curriculum Guide to Substance Abuse*. Kansas City MO: The Society of Teachers of Family Medicine, 1984. 255pp.

This volume summarizes the core content of an alcohol and substance use curriculum, incorporating pharmacology, pathophysiology, diagnosis, referral, detoxification, rehabilitation, and prevention. It also presents educational objectives, discusses teaching

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* Social Work author

techniques, offers strategies for initiating curriculum change, and provides an extensive list of audiovisual and print materials. Though directed to family physicians the bulk of the material is applicable to clinicians of all disciplines. (Project Cork Institute)
Contact: Society of Teachers of Family Medicine, P.O. Box 8729, Kansas City MO, 64114. 800/274-2237.

5. Schlesinger SE; Barg MD. Substance misuse training in nursing, psychiatry, and social work. *Inter J Addict* 26(5):595-604, 1986. (37 refs.)
This is a survey study of American schools of nursing, psychiatry residency programs, and schools of social work to develop information on the extent to which nurses, psychiatrists, and social workers are prepared in their professional education to identify and treat substance misusers. Results describing nature, format, and extent of training experiences are presented for didactic and patient contact components of programs. Results are discussed in light of the finding that not much time is devoted to substance misuse in the professional preparation of these health care providers. (Authors' Abstract)

6. *van Wormer K . Social work and alcoholism counseling. *Soc Casework* 68(7):426-432, 1987. (39 refs.)
In recent years, alcoholism counseling centers have proliferated throughout the United States. The social work profession has the opportunity to expand its expertise into this field. Many counselors are recovering alcoholics, without formal training in counseling, from whom social workers can learn. (Author Absract)

7. *van Wormer K. Training social work students for practice with substance abusers: An ecological approach. *J Soc Work Educa* 23(2):47-56, 1987.

8. *van Wormer K. The sociology of alcoholism counseling: A social worker's perspective. *J Sociol Soc Welfare* 13(3):643-656, 1986. (166 refs.)
Contends that alcoholism counseling (AC) is an occupation striving for professional identity. A sociological analysis of the AC field is presented, including a review of AC in the past, in which counselors were recovering addicts, and the present, in which more highly trained professionals have entered the field. Occupational belief systems are described and counselor role requirements are explained. The occupations of AC and substance abuse or addictions counseling are considered against the background of ideal typical criteria for a profession. It is concluded that AC as a field is seeing rapid change in which 2 formerly opposing categories of personnel (social worker and alcoholism counselor), divided by occupational and personal background, are coming together in pursuit of common ground. (©Psycinfo Abstract)

Curriculum Materials

1. Ackerman RJ. *Children of Alcoholics: A Bibliography and Resource Guide, Third Edition*. Holmes Beach FL: Learning Publications, Inc. 1987. 82 pp.
Divided into three sections, the topics include: the child of the alcoholic, what it's like, suggestions for educators, and suggestions for therapists and parents. The volume also includes lists of resource materials and agencies. (Project Cork Institute)

2. Barnes GM; Augustino DK. *Alcohol and the Family: A Comprehensive Bibliography*. New York: Greenwood Press, 1987. 461 pp.

3. Cox A. *Training Guidelines and Workbook for the Behavioral Management of Intoxicated and Disruptive Clients*. Toronto Canada: Addiction Research Foundation, 1981. 58 pp.

Disruptive clients are a major source of clinician anxiety and apprehension in working with clients using alcohol and other drugs. Management of disruptive clients is a topic often omitted from education programs. Designed for use by instructors in training courses; the workbook consists of text for the course, plus tips and exercises for conducting the training sessions. Much of the material is applicable to disruptive clients generally. (Project Cork Institute)

4. Faltz BG; Rinaldi J. *AIDS and Substance Abuse: A Training Manual for Health Professionals*. San Francisco CA: University of California Regents, 1987. 100 pp.

This curriculum, designed as a resource for training health care professionals either in a workshop or via self-study is suitable for any in the helping professions. The material, a product of the AIDS Health Project, was edited and authored by professional staff of the San Fransisco General Hospital. It is organized into six sections: an overview of AIDS and substance abuse, a review of substance abuse including a glossary of street terminology, attitudinal barriers to care, four case histories focusing upon common problematic presentations, nursing care plans, and addressing different populations such as "the worried well," patients with different diagnoses along the spectrum of HIV and related diagnoses, and special populations. Supplemental readings and resources are provided. (Project Cork Institute)

5. Gabel LL; Monk JS. *Adolescent Alcoholism: Recognizing, Intervening, and Treating*. Columbus OH: Ohio State University School of Medicine, Department of Family Medicine, 1987.

The program includes a faculty Guide and six manuals, that cover (1) *Adolescents and Substance Abuse: An Overview;* (2) *The Physician's Role in Prevention*; (3) *Recognition and Diagnosis;* (4) *Intervention with the Dependent Adolescent* ; (5) *The Physician's Role in Referral and Treatment*; (6) *Alcohol and Other Chemicals* . (Project Cork Institute)

6. Heath AW; Atkinson BJ. Systematic treatment of substance abuse: A graduate course. *J Marital Fam Ther* 14: 411-418, 1988.

7. Kenyon R; Sawka E. *Primary Prevention of Substance Abuse: An Annotated Bibliography of Related Literature (1981-1987)*, Alberta Canada: Alberta Alcohol and Drug Abuse Commission, 1987. 144 pp.

This annotated bibliography of approximately 500 references is organized into six broad categories of general, alcohol, illicit drugs, pharmaceuticals, solvent/inhalant, and tobacco, and then sub-categorized by the topics of research, policy, theories, programs, international, historical, and other.

Contact: Alberta Alcohol and Drug Abuse Commission, 7th Floor Pacific Plaza, 10909 -Jasper Avenue, Edmonton AB T5J 3M9, Canada.

8. *King G; *Altpeter M; Spada M. Alcoholism and the elderly: A training model. *Alcohol Treat Q* 3(3):81-94, 1986. (16 refs.)

The 1981 NCA Preliminary Report on Aging and Alcoholism estimated that there are 1-3 million elderly alcoholics yet only 15% are receiving treatment. This paper describes some of the obstacles and issues in identifying and treating elderly alcoholics. A model training program is presented which addresses the training needs of counselors in elderly services and alcoholism services in order for them to provide alcoholism identification, referral and treatment of elderly clientele. (Authors' Abstract)

9. *Kurtz NR; *Goggins B; *Howard H. *Occupational Alcoholism: An Annotated Bibliography*. Toronto Canada: Addiction Research Foundation, 1984. 218 pp.
Organized into 20 cross-referenced topics, the bibliography include sections on program descriptions, treatment outcome, training of supervisors and insurance and legal considerations. (Project Cork Institute)

10. Russell M; Henderson C; Blume SB, eds. *Children of Alcoholics: A Review of the Literature*. New York: Children of Alcoholics Foundation, 1985.
This literature review, the first from a scholarly perspective, following a brief discussion of the children of alcoholics syndrome, reports the findings on genetically influenced characteristics related to alcohol, the germ cell and in utero effects of parental alcohol use, familial transmission of emotional and physical disorders associated with alcoholism, family studies in alcoholism, prevention and treatment, and ethics and public policy issues. (Project Cork Institute)

11. Stanton MD. Course work and self-study in the family treatment of alcohol and drug abuse: Expanding Heath and Atkinsons' curriculum. *J Marital Fam Ther* 14:419-427, 1988. (47 refs.)

12. *Watts TD; *Wright R. *Black Alcohol Abuse and Alcoholism: An Annotated Bibliography*. New York: Praeger Publications; 1986.

14. Wittman FD; Shane P. *Literature Search and Target Selection Criteria for the Study of Community-level Planning for the Prevention of Alcohol and Drug Problems*. Commissioned study. (Unpublished Manuscript), 1989.
The Literature Review within this report focuses upon community planning activities to prevent alcohol and drug problems. The review was conducted as partial fulfillment of a contract undertaken by CLEW Associates for EMT Associates. The criteria for inclusion of materials were those that provide descriptions, assessment, and models of community prevention planning efforts, that utilize a "community level systems approach".that describe actual planning projects and/or policies, and that discuss strategies and methods, preferably with a discussion of experiences gained from actual community planning activity. The Bibliography is organized into three sections. Section I is.comprised of Agency-sponsored Programs, with four programs briefly described, plus citations with annotations for the publications produced by these programs. Section II highlights four Specific Projects, again with annotated citations. Section III focuses upon General works and has 106 entries, not all of which include annotations. (Project Cork Institute)
Available through EMT Associates, 3090 Fite Circle, Suite 201, Sacramento CA, 95827. Att. Joel Phillips.

The Impaired Colleague

1. Alcoholism Committee. *Alcoholism Among Social Workers: Approaching a Colleague with a Drinking Problem*. New York: New York City Chapter, NASW, 1978. 13pp.
This compact but informative pamphlet was prepared by the Chapter's Alcohol Committee in response to its survey of members (1976) attempting to discern the extent and nature of colleagues' alcohol use problems. The brochure addresses the dilemmas of intervention, the basic concepts and the rationale for intervention, signs and symptoms of problems related to alcohol use, guidelines for interventions including a list of things to do and not to do, treatment resources, and a suggested reading list. (Project Cork Institute)

Contact: Alcoholism Committee, New York City Chapter NASW, 79 Madison Avenue, New York NY, 10016.

2. Bissell L; Haberman PW. *Alcoholism in the Professions*. New York: Oxford University Press, 1984. 214 pp.
The authors describe the first longitudinal study of alcoholic men and women in the professions. Based on interviews with 407 professionals over a five year period, it offers the only follow-up study of alcoholic social workers, as well as similar data on physicians, nurses, dentists, and attorneys. (Project Cork Institute)

3. Crosby LR; Bissell L. *To Care Enough: Intervention with Chemically Dependent Colleagues*. Minneapolis MN: The Johnson Institute, 1989.
This brief volume provides a rationale for and discusses approaches to colleagues with a suspected problem with either alcohol or other drugs. (Project Cork Institute)

4. Social Workers Helping Social Workers
A support group system developed for impaired social work professionals.
Contact: John F. Fitzgerald, M.S.W., Ph.D., Route #63, Goshen CT, 06756. 203/491-2490, 203/566-2696

5. *Waring ML; *Petraglia G; *Cohen L; *Busby E. Alcohol use patterns of graduate students in social work and business. *J Stud Alcohol* 45(3):268-271, 1984. (12 refs)
This comparative study is among the first to survey the drinking behavior of graduate students in social service (N=256) and in business (N=147). A large majority (88%) drank. A significantly greater number of social service students abstained. Irrespective of school, age or religion, men and women drank at a similar level of frequency—several times weekly. Only business school women, controlling for age and religion, were significantly heavier drinkers than were women in social service. Older Hispanic social service men were significantly lighter drinkers than similar Caucasians. All women preferred wine, whereas men had no particular beverage preference. Although there was no significant difference in the location of drinking —in bars, restaurants or at home—most students drank in restaurants. Irrespective of previous course work or work experience with alcoholics, social service students wanted alcohol education. However, business students showed almost no interest in this area of study, despite the known deleterious role that alcohol misuse plays in the employment arena. Major conclusions are that both business and social service students lack alcohol education, although most drink. This is an important blind spot among business students, who will be making critical business decisions. It is also inadequate preparation for social service practice. (Authors' Abstract)

Sources of Information

Library, School of Social Work

The single most important source of further information for social work faculty is the professional staff of the Library, of their School of Social Work. Too often the Library is under-utilized by both faculty and students alike. The Library is not just an archival repository, but can offer it's primary users a system of personalized academic support and information services. The Librarian and staff are generally available to identify and acquire materials, to assist in reference requests, and to provide current awareness services, i.e. alerting faculty to publications. Interaction with faculty assists the librarian in selecting materials for acquisition that will be of most value to the library's primary users.

Even for faculty who feel confident in their ability to answer questions independently, discussion with the Library staff can be mutually helpful. The faculty's personal knowledge of activities in the field can alert the librarian to new reports, government documents and other "fugitive" materials that will be important to the library users but which might not otherwise be identified through traditional sources for many months. The librarian can assist the faculty member in identifying additional sources, in refining and improving search strategies for online database searches, and in locating copies of fugitive materials.

Faculty should also consider the Library as the the place to house the materials that they have acquired. It is not uncommon for faculty to "file" materials into piles in the corner of an office, or to relegate them to a carton for future filing. Not only does the individual later have difficulty finding documents, but the materials are totally inaccessible to colleagues. By placing materials in the library, they will be appear on acquisition lists distributed to all library users, be catalogued, indexed and readily retrievable.

Online Databases specifically on Alcohol and/or Other Drugs

Consult the School of Social Work Library's Reference Librarian for information on accessing these systems. All but *Alcohol Epidemiologic Data System's (Quick Facts)* are available on BRS, which has most academic institutions among its subscribers.

Alcohol Epidemiologic Data System (Quick Facts)

Producer: CSR, Inc. 1400 Eye St., N.W., Suite 600, Washington DC, 20005 202/842-7600.
Statistical tables containing alcohol-related data covering nineteenth century historical data to the most current available data. Authoritative current statistical information is entered as it becomes available. Document delivery is not available.

CORK: Alcohol Information for Clinicians and Educators

Producer: Project Cork Resource Center, Dartmouth Medical School, Hanover, NH 03756. 603/646-7540.
In January 1990, the scope of the database will be expanded to include selected drug literature, as well as alcohol information, both drawn from the clinical literature, the biological and social sciences; audio-visual materials, and organizational resources will be available. Bibliographic materials include journal articles, government reports, technical reports, conference papers and books, with the inclusion of considerable fugitive literature.The database coverage is from 1978 to the present ,with selected retrospective coverage. The collection contains 13,000 documents, and is updated quarterly. A thesaurus for search terms is available. Document delivery is offered for unpublished papers or articles that are not otherwise available. Available through BRS Information Technologies, most academic institutions are subscribers to BRS. (Project Cork Institute)

Drug Info and Alcohol Use and Abuse

Producer: Drug Information Services (DIS), College of Pharmacy, University of Minnesota, Minneapolis, MN 55455. 612/ 624-6492.
Drug Info, containing over 25,000 documents and updated quarterly, covers the educational, sociological and psychological aspects of alcohol and drug use and abuse. Coverage is from 1968 to the present with selected retrospective coverage. A thesaurus is available. Document delivery is offered for unpublished papers or articles that are not otherwise available. Available through BRS Information Technologies, most academic institutions are subscribers to BRS. (Project Cork Institute)

ETOH: Alcohol and Alcohol Problems Science Database

Producer: National Institute on Alcohol Abuse and Alcoholism (NIAAA), 5600 Fishers Lane, Rockville, MD 20857. 202/842-7600.

The largest of databases *ETOH* contains over 60,000 documents from 1972 to the present, on alcohol-related topics. It is directed to the scientific and professional community, but includes materials from the popular press and lay groups in addition to professional works. It is updated monthly. Document delivery is not available. A thesaurus is now being prepared to assist in searching the database. Available through BRS Information Technologies, most academic institutions are subscribers to BRS. (Project Cork Institute)

Directories

ALMACA Membership Directory, 1988-1989. Arlington VA: The Association of Labor-Management Administrators and Consultants on Alcoholism, Inc. 237 pp.

Published on an annual basis, the membership directory includes the name, address, telephone number, and employer for members and is organized by state. Since publication ALMACA has changed its name to Employee Assistance Professionals Association (EAPA).

Contact: EAPA, 4601 North Fairfax Drive, Suite 1001, Arlington VA, 22203. 703/522-6272.

Directory of Academic Institutions and Organizations: Drug, Alcohol, and Employee Assistance Program Educational Resources. Rockville MD: Office of Workplace Initiatives, National Institute on Drug Abuse, 1988. 97 pp.

The Directory was prepared to provide a listing of educational and training opportunities for those employed in the area of Employee Assistance. The information is presented in a matrix format and is organized into three sections: academic institutions within each state, national organizations, and State alcohol and drug abuse agencies. For academic programs the following information is provided: the name, address and telephone number, and faculty member, the topics of and type of course offerings, either formal coursework, training sessions, or workshops, and prerequisites for enrollment. For National Organizations and State agencies, the name, address, and telephone number is provided and the type of programs offered. (Project Cork Institute)

National Directory of Drug Abuse and Alcoholism Treatment and Prevention Programs. Rockville MD: National Institutes on Alcohol Abuse and Alcoholism and Drug Abuse, 1989. 371 pp.

Compiled jointly by the National Institute on Alcohol Abuse and Alcoholism (NIAAA) and the National Institute on Drug Abuse (NIDA), the Directory includes over 8,000 federal, state, local ,and private facilities that provide alcohol and drug treatment in the United States and Puerto Rico. Information is provided on each program's orientation, i.e. whether providing alcohol and/or drug treatment, the type of treatment, and the special populations served. (Project Cork Institute)

Substance Abuse Librarians and Information Specialists (SALIS) Directory. Berkeley CA: Alcohol Research Group, 1988. Mitchell AL,ed. 115 pp.

This directory is a comprehensive compilation of specialized resources in the alcohol and substance abuse fields. It includes annotated lists of libraries, clearinghouses, resource centers and information centers, special collections, plus associations and organizations. The materials are organized by geographical area. This volume is an invaluable resource to identify virtually all the national and international alcohol and drug resources. It is also noteworthy for the inclusion of addresses, telephone numbers, and names of contact persons to ease the acquisition of information. (Project Cork Institute)

Special Populations

Native American Research Information Service (NARIS)

American Indian Institute, The University of Oklahoma, 555 Constitution Ave., Norman OK, 73037. 405/325-4127. Contact: Duane Hale Ph.D., Program Development Specialist.

NARIS is a computerized database of information pertinent to Native Americans and Native Alaskan issues. The database includes over 15,000 citations. Most citations include complete bibliographic information, funding sources, document location, tribe, geographic location, index terms, and a brief abstract of the study. NARIS includes ongoing research and studies that have not been published or widely distributed.

Note: Seemingly a disproportionate amount of valuable information pertinent to Native Americans is "fugitive' literature. This literature includes master's theses, doctoral dissertations or similar scholarly studies that have never been published, as well as studies commissioned by the Indian Health Service and Bureau of Indian Affairs, which have not systematically collected or catalogued the materials produced with funds from those agencies. Thus, locating original sources is difficult. Many citations in some scholarly works are to unpublished materials, the reader is often "forced " to accept the author's interpretations as the original sources are difficult to access.

RESOUCES

Descriptors by Selected Generic Topics. A controlled vocabulary developed by NARIS. 60 pp.

RADAR Center on Prevention Resources for African Americans/Blacks

Cork Institute on Black Alcohol and Drug Abuse, Morehouse School of Medicine, 720 Westview Drive, S.W., Atlanta GA, 30310-1780. 404/752-1780. Director: Omowale Amuleru-Marshall, Ph.D., M.P.H..

This organization has been designated by the RADAR system (See: Office for Substance Abuse Prevention, in Section III) as the national repository of resources designed and tailored to African Americans on topics related to alcohol and other drug education, prevention, and AIDs and the HIV drug abusers. This is a designated RADAR Center that supports the work of prevention professionals who work with African Americans, and particularly high risk Black youth. The Center is currently identifying material and assembling its collection, and anticipates being able to respond to queries within six months. The mission of The Cork Institute on Black Alcohol and Drug Abuse, established in 1985, is to educate predominantly black, primary care physicians for the medically underserved and socioeconomically disadvantaged. The Institute has a Resource Center which collects both print and nonprint information.